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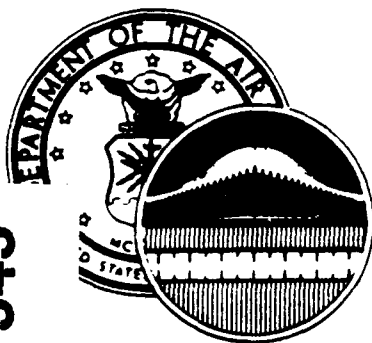
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UNITED STATES AIR FORCE

OCCUPATIONAL SURVEY REPORT

MEDICAL ADMINISTRATIVE CAREER LADDER

AFSC 906X0

AFPT 90-906-791

MAY 1989

89

OCCUPATIONAL ANALYSIS PROGRAM
USAF OCCUPATIONAL MEASUREMENT CENTER
AIR TRAINING COMMAND
RANDOLPH AFB, TEXAS 78150-5000

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USAFOMC/OMDQ	1			
3507 ACS/DPKI	1			

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PREFACE

This report presents the results of a detailed Air Force Occupational Survey of the Medical Administrative career ladder (AFSC 906X0). Authority for conducting occupational surveys is contained in AFR 35-2. Computer products upon which this report is based are available for use by operations and training officials.

The survey instrument was developed by Chief Master Sergeant Anthony J. O'Flaherty, Inventory Development Specialist, with computer programming support furnished by Ms Rebecca Hernandez. Ms Raquel A. Soliz provided administrative support. Mr Robert L. Alton, Occupational Analyst, analyzed the data and wrote the final report. This report has been reviewed and approved by Lieutenant Colonel Charles D. Gorman, Chief, Airman Analysis Branch, Occupational Analysis Division, USAF Occupational Measurement Center (USAFOMC).

Copies of this report are distributed to Air Staff sections, major commands, and other interested training and management personnel. Additional copies are available upon request to the USAF Occupational Measurement Center, Attention: Chief, Occupational Analysis Division (OMY), Randolph AFB, Texas 78150-5000 (AUTOVON 487-6623).

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SUMMARY OF RESULTS

1. <u>Survey Coverage</u>: The Medical Administrative career ladder was surveyed to obtain current data for use in training management decisions. Survey results are based on responses from 1,657 respondents (83 percent of the total personnel surveyed and 41 percent of the total assigned population). All major using commands are well represented in the survey sample.

2. <u>Specialty Jobs</u>: Survey data depict a very diverse career ladder. Nine clusters and eight independent jobs were identified in the sample. One cluster was oriented toward supervisory, managerial, and training activities. The remaining 16 jobs represent separate and distinct technical jobs performed in the career ladder.

3. <u>Career Ladder Progression</u>: Personnel at the 3- and 5-skill levels spent practically all of their job time performing technical duties and tasks across a wide variety of different jobs. Although 7-skill level NCOs still devote over 50 percent of their relative duty time to nonsupervisory tasks across a number of different jobs, a shift toward supervisory functions is quite clear. At the 9-skill and CEM Code level, there is a definitive supervisory and managerial role.

4. <u>AFR 39-1 Specialty Descriptions</u>: All descriptions accurately depict the nature of the respective jobs.

5. <u>Training Analysis</u>: The Specialty Training Standard (STS) and Plan of Instruction (POI) are not generally supported by OSR data when measured by the normal standards. Both documents, as well as the general training philosophy for this career ladder, should be thoroughly evaluated by training personnel and career ladder managers to determine the most effective and efficient way to provide training to the diverse functions of this career ladder.

6. <u>Implications</u>: The diversity of the career ladder is such that the usual ATC measurement criteria for ABR training does not support the majority of the current course. A comprehensive review of the career ladder structure, personnel utilization policies, and the current training system is needed.

OCCUPATIONAL SURVEY REPORT
MEDICAL ADMINISTRATIVE CAREER LADDER
(AFSC 906X0)

INTRODUCTION

This is a report of an occupational survey of the Medical Administrative career ladder completed by the Occupational Analysis Division, USAF Occupational Measurement Center. This survey was requested by the 3790th Medical Service Training Wing (formerly School of Health Care Sciences)/MSOX, Sheppard Technical Training Center, to obtain current task and equipment data for use in evaluating current training programs. The last survey results pertaining to this career ladder were published in July 1980.

Background

As described in AFR 39-1 Specialty Descriptions, personnel in this career ladder are responsible for preparing and maintaining various types of general and specialized medical and patient records; compiling and producing various types of general and statistical reports; and routine medical facility administrative functions such as general typing and filing, personnel actions, and unit receptionist activities.

Primary entry into the career ladder is from Basic Military Training School (BMTS) through a Category A 6-week and 2-day formal training course (one week of the course duration consists of Course J3AQR90030 001, Basic Medical Readiness) conducted at Sheppard AFB, Texas. Entry into the career ladder currently requires an Armed Services Vocational Aptitude Battery (ASVAB) General score of 43.

SURVEY METHODOLOGY

Inventory Development

The data collection instrument for this occupational survey was USAF Job Inventory AFPT 90-906-791, dated April 1988. A tentative task list was prepared after reviewing pertinent career ladder publications and directives, tasks from the previous survey instrument, and data from the last Occupational Survey Report (OSR). The preliminary task list was refined and validated through personal interviews with 55 subject-matter experts (selected to cover a variety of major commands (MAJCOM) and varying types of medical treatment facilities) at the following locations:

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BASE	REASON FOR VISIT
Beale AFB CA	Representative of a small hospital
Mather AFB CA	Representative of a facility close to the size of a regional hospital
McClellan AFB CA	Representative of clinic-level operation
Lackland AFB TX	Largest USAF Medical Center, with various levels of job specialization
Scott AFB IL	Representative of a USAF Medical Center, MAJCOM level duties, Information Systems functions, and Aeromedical Evacuation functions
Sheppard AFB TX	Location of ATC technical training courses

The resulting job inventory contained a comprehensive listing of 745 tasks grouped under 20 duty headings and a background section requesting such information as grade, duty title, type of facility to which assigned, and equipment used or operated.

Survey Administration

From May through August 1988, Consolidated Base Personnel Offices (CBPO) in operational units worldwide administered the inventory to military job incumbents holding DAFSCs 90630, 90650, 90670, 90690, and CEM Code 90600. Job incumbents were selected from a computer-generated mailing list obtained from personnel data tapes maintained by the Human Resources Laboratory (HRL).

Each individual who completed the inventory first completed an identification and biographical information section and then checked each task performed in his or her current job. After checking all tasks performed, each member then rated each of these tasks on a 9-point scale showing relative time spent on that task, as compared to all other tasks checked. The ratings ranged from 1 (very small amount time spent) through 5 (about average time spent) to 9 (very large amount spent).

To determine relative time spent for each task checked by a respondent, all of the incumbent's ratings are assumed to account for 100 percent of his or her time spent on the job and are summed. Each task rating is then divided by the total task ratings and multiplied by 100 to provide a relative percentage of time for each task. This procedure provides a basis for comparing tasks in terms of both percent members performing and average percent time spent.

Survey Sample

Personnel were selected to participate in this survey so as to ensure an accurate representation across major commands (MAJCOM) and military paygrade groups. Due to the large numbers of assigned 906X0 personnel (over 3,000), a stratified random sample process was used to select survey participants. Approximately 50 percent of the assigned 906X0 personnel were selected for survey participation. Table 1 reflects the percentage distribution, by MAJCOM, of assigned AFSC 906X0 personnel as of April 1988. The 1,657 respondents in the final sample represent 41 percent of the total assigned AFSC 906X0 personnel and 83 percent of the total personnel surveyed. Table 2 reflects the paygrade distribution for 906X0 personnel. As reflected in these tables, the survey sample is an excellent representation of the career ladder population.

Task Factor Administration

While most participants in the survey process completed a USAF Job Inventory, selected senior 906X0 personnel were asked to complete booklets rendering judgements on task training emphasis (TE) or task difficulty (TD). The TE and TD booklets were processed separately from the job inventories. The information gained from these task factor data is used in various analyses and is a valuable part of the training decision process.

Task Difficulty (TD). Each individual completing a TD booklet was asked to rate all of the tasks on a 9-point scale (from extremely low to extremely high) as to the relative difficulty of each task in the inventory. Difficulty is defined as the length of time required by the average incumbent to learn to do the task. TD data were independently collected from 66 primarily 7-skill level personnel stationed worldwide. Interrater reliability was determined to be adequate, which reflects a satisfactory agreement among raters. Ratings were standardized so tasks have an average difficulty of 5.00, with a standard deviation of 1.00. The resulting data yield essentially a rank ordering of tasks indicating the degree of difficulty for each task in the inventory.

Training Emphasis (TE). Individuals completing TE booklets were asked to rate tasks on a 10-point scale (from no training required to extremely high amount of training required). TE is a rating of which tasks require structured training for first-term personnel. Structured training is defined as training provided at resident technical schools, field training detachments (FTD), mobile training teams (MTT), formal OJT, or any other organized training method. TE data were independently collected from 41 experienced 7-skill level personnel stationed worldwide. The interrater reliability for these raters was adequate, indicating there was satisfactory agreement among raters as to which tasks required some form of structured training and which did not. In this specialty, tasks have an average TE rating of 2.00; tasks considered high in TE have ratings of 3.46 and above. As was discussed in the Task Difficulty (TD) section above, TE rating data may also be used to rank order tasks indicating those tasks which senior NCOs in the field consider the most important for the first-term airman to know.

TABLE 1

COMMAND DISTRIBUTION OF 906X0 PERSONNEL

COMMAND	PERCENT OF ASSIGNED*	PERCENT OF SAMPLE
ATC	20	21
SAC	19	18
TAC	16	16
MAC	14	12
USAFE	11	12
PACAF	6	7
AFSC	4	5
AFLC	4	3
AAC	2	2
OTHER	4	4
TOTAL	100	100

Total Assigned   - 4,031
Total Surveyed** - 2,007
Total in Survey Sample - 1,657
Percent of Assigned in Sample - 41%
Percent of Surveyed in Sample - 83%

 * Assigned strength as of April 1988
** Stratified random sample (excludes persons in
   PCS status, hospital, or less than 6 weeks on
   the job)

TABLE 2

PAYGRADE DISTRIBUTION OF SURVEY SAMPLE

GRADE	PERCENT OF ASSIGNED*	PERCENT OF SAMPLE
AIRMAN	31	32
E-4	31	27
E-5	20	22
E-6	9	10
E-7	6	6
E-8	2	2
E-9	1	1

* Assigned strength as of April 1988

When used in conjunction with the primary criterion of percent members performing, TD and TE ratings can provide insight into first-term personnel training requirements. Such insights may suggest a need for lengthening or shortening portions of instruction supporting AFS entry-level jobs.

SPECIALTY JOBS
(Career Ladder Structure)

A USAF occupational analysis begins with an examination of the career ladder structure. The structure of jobs within the Medical Administrative career ladder was examined on the basis of similarity of tasks performed and the percent of time spent ratings provided by job incumbents, independent of other specialty background factors.

Each individual in the sample performs a set of tasks called a job. For the purpose of organizing individual jobs into similar units of work, an automated job clustering program is used. This hierarchical grouping program is a basic part of the Comprehensive Occupational Data Analysis Program (CODAP) system for job analysis. Each individual job description (all the tasks performed by that individual and the relative amount of time spent on those tasks) in the sample is compared to every other job description in terms of tasks performed and the relative amount of time spent on each task in the job inventory. The automated system is designed to locate the two job descriptions with the most similar tasks and percent time ratings and combine them to form a composite job description. In successive stages, new members are added to initial groups or new groups are formed based on the similarity of tasks performed and similar time ratings in the individual job descriptions.

The basic identifying group used in the hierarchical job structuring process is the Job. When there is a substantial degree of similarity between Jobs, they are grouped together and identified as a Cluster. Specialized Jobs too dissimilar to fit within a Cluster are labeled Independent Jobs (IJ). The job structure information resulting from this grouping process (the various jobs within the career ladder) can be used to evaluate the accuracy of career ladder documents (AFR 39-1 Specialty Descriptions and Specialty Training Standards) and to gain a better understanding of current utilization patterns. The above terminology will be used in the discussion of the 906X0 career ladder structure.

Overview of Specialty Jobs

Responses from the 906X0 personnel in the survey sample indicate a career ladder that is clearly quite diverse, with only a limited number of general administrative-type tasks appearing in common across the jobs identified. Structure analysis identified nine clusters and eight independent jobs within the survey sample. Based on task similarity and relative time spent, the division of jobs performed by 906X0 personnel is illustrated in Figure 1, and

AFSC 906X0 SPECIALTY JOBS
(N=1,657)

METHODS IMPROVEMENT PROGRAM NCOs .7%

SUPERVISORY PERS 17%

FACILITY MGMT PERS 2%

RESOURCES MGMT PERS 7%

HEALTH BENEFITS ADVISORS .7%
APPOINTMENTS PERS 2%

OUTPATIENT RECORDS PERS 18%

AEROMEDICAL EVACUATION PERS 4%

MEDICAL READINESS NCOs 4%

PERSONNEL SERVICES 7%

UNIT TRAINING NCOs .7%

ADMIN SERVICES PERS 10%

MEDICAL REFERENCE LIBRARY PERS .4%
CLINICAL (INPATIENT) RECORDS PERS 5%

NOT GROUPED 12%

MEDICAL INFO SYS PERS 2%
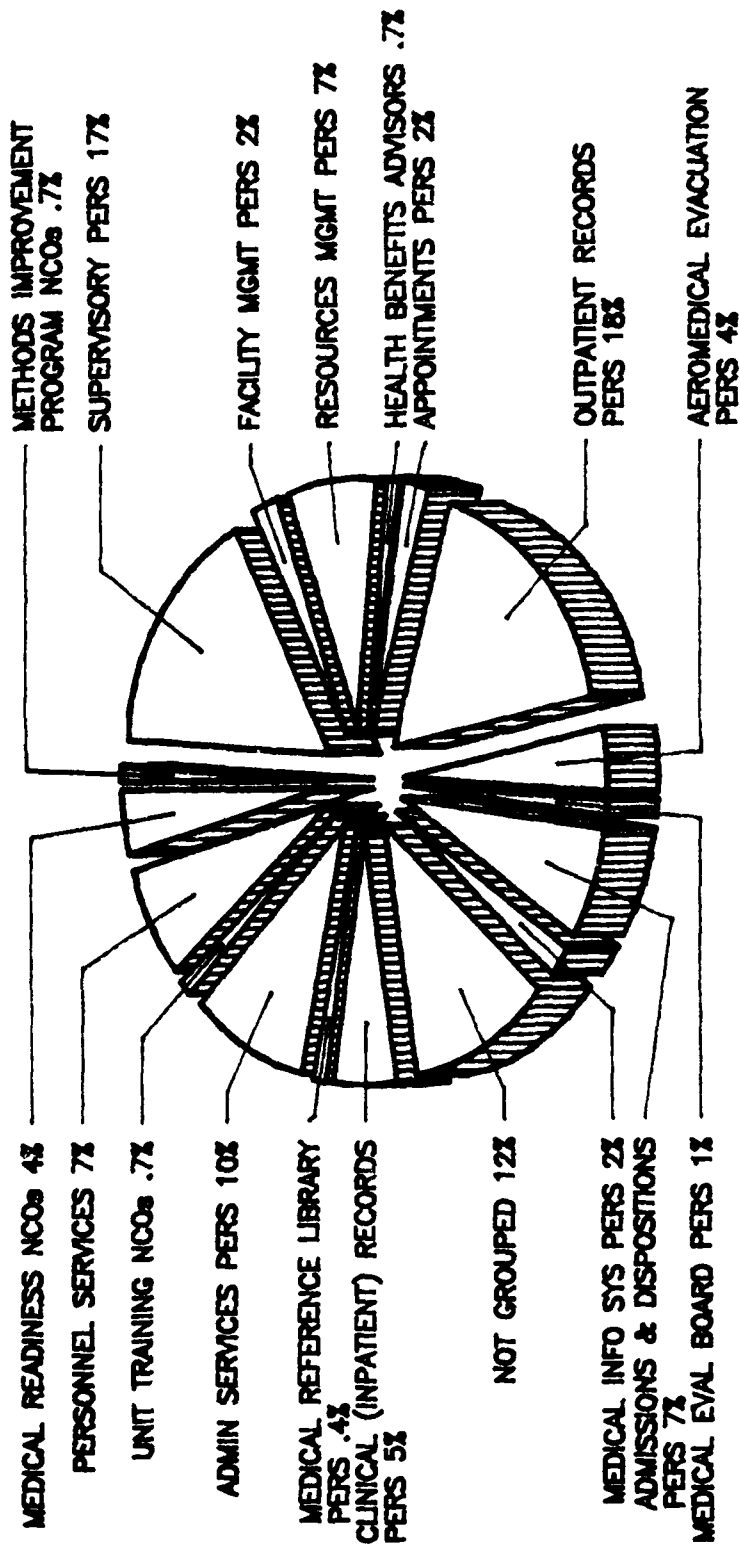ADMISSIONS & DISPOSITIONS PERS 7%
MEDICAL EVAL BOARD PERS 1%

Figure 1

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a listing of those clusters and independent jobs is provided below. The stage (ST) number shown beside each title is a reference to computer printed information; the number of personnel in each group (N) is also shown.

    I.   ADMINISTRATIVE SERVICES PERSONNEL CLUSTER (ST0075, N=169)

    II.   PERSONNEL SERVICES CLUSTER (ST0076, N=116)

    III.   MEDICAL REFERENCE LIBRARY PERSONNEL (IJ) (ST0193, N=6)

    IV.   UNIT TRAINING NCOs (IJ) (ST0285, N=12)

    V.   MEDICAL READINESS NCOs (IJ) (ST0336, N=66)

    VI.   SUPERVISORY PERSONNEL CLUSTER (ST0117, N=282)

    VII.   FACILITY MANAGEMENT PERSONNEL (IJ) (ST0220, N=32)

    VIII. METHODS IMPROVEMENT PROGRAM NCOs (IJ) (ST0190, N=11)

    IX.   MEDICAL EVALUATION BOARD (MEB) PERSONNEL (IJ) (ST0196, N=24)

    X.   MEDICAL INFORMATION SYSTEMS PERSONNEL (IJ) (ST0219, N=28)

    XI.   RESOURCES MANAGEMENT PERSONNEL CLUSTER (ST0046, N=109)

    XII.   HEALTH BENEFITS ADVISORS (IJ) (ST0199, N=12)

    XIII. APPOINTMENTS PERSONNEL CLUSTER (ST0099, N=40)

    XIV.   OUTPATIENT RECORDS PERSONNEL CLUSTER (ST0064, N=301)

    XV.   ADMISSIONS AND DISPOSITIONS PERSONNEL CLUSTER (ST0092, N=118)

    XVI.   CLINICAL (INPATIENT) RECORDS PERSONNEL CLUSTER (ST0039, N=75)

    XVII. AEROMEDICAL EVACUATION PERSONNEL CLUSTER (ST0052, N=64)

The respondents forming these groups account for 88 percent of the survey sample. The remaining 12 percent were performing tasks or series of tasks which did not group with any of the defined jobs. Job titles given by respondents which were representative of these personnel included Flight Medicine Clerk, Medical Release Clerk, and Laboratory Supply Technician.

Group Descriptions

The following paragraphs contain brief descriptions of the clusters and independent jobs identified through the career ladder structure analysis. Selected background data for these groups are provided in Table 3. Representative tasks for all the groups are contained in Appendix A.

TABLE 3

SELECTED BACKGROUND DATA FOR SPECIALTY JOB CLUSTERS AND INDEPENDENT JOBS

	ADMIN SERVICES PERSONNEL	PERSONNEL SERVICES	MEDICAL REFERENCE LIBRARY PERSONNEL	UNIT TNG NCOs	MEDICAL READINESS NCOs	SUPERVISORY PERSONNEL	FACILITY MGT PERSONNEL	METHODS IMPRVMT PROGRAM NCOs	MED EVAL BOARD PERSONNEL
NUMBER IN GROUP	169	116	6	12	66	282	32	11	24
PERCENT OF TOTAL SAMPLE	10%	7%	*	*	4%	17%	2%	*	1%
PERCENT IN CONUS	80%	69%	100%	92%	65%	72%	75%	82%	67%
DAFSC DISTRIBUTION:									
90630	10%	7%	33%	0%	6%	1%	6%	0%	0%
90650	70%	72%	67%	84%	55%	29%	56%	45%	58%
90670	20%	21%	0%	8%	39%	51%	38%	55%	38%
90690	*	0%	0%	0%	0%	12%	0%	0%	0%
90600	0%	0%	0%	8%	0%	7%	0%	0%	4%
PREDOMINANT GRADE	E-3/4/5	E-3/4/5	E-4	E-4/5	E-4/5/6	E-5/6/7	E-5/6	E-5/6	E-4/5
AVERAGE MONTHS IN CAREER FIELD	61	52	33	73	80	138	101	135	100
AVERAGE MONTHS IN SERVICE	71	57	35	101	101	165	138	139	125
PERCENT IN FIRST ENLISTMENT	46%	55%	67%	17%	23%	4%	12%	9%	25%
PERCENT SUPERVISING	14%	25%	0%	25%	21%	90%	22%	27%	54%
AVERAGE NUMBER TASKS PERFORMED	31	49	23	40	62	98	75	48	71

* Less than 1 percent

TABLE 3 (CONTINUED)

SELECTED BACKGROUND DATA FOR SPECIALTY JOB CLUSTERS AND INDEPENDENT JOBS

	MEDICAL INFO SYS PERSONNEL	RESOURCES MANAGEMENT PERSONNEL	HEALTH BENEFITS ADVISORS	APPOINTMENTS PERSONNEL	OUTPATIENT RECORDS PERSONNEL	ADMISSIONS AND DISPOSITIONS PERSONNEL	CLINICAL (INPATIENT) RECORDS PERSONNEL	AEROMED EVACUATION PERSONNEL
NUMBER IN GROUP	28	109	12	40	301	118	75	64
PERCENT OF TOTAL SAMPLE	2%	7%	*	2%	18%	7%	5%	4%
PERCENT IN CONUS	89%	72%	92%	82%	77%	79%	80%	69%
DAFSC DISTRIBUTION:								
90630	3%	11%	17%	7%	30%	13%	10%	8%
90650	64%	77%	75%	83%	58%	80%	83%	76%
90670	29%	11%	8%	10%	12%	7%	7%	16%
90690	4%	0%	0%	0%	0%	0%	0%	0%
90600	0%	1%	0%	0%	0%	0%	0%	0%
PREDOMINANT GRADE	E-4/5	E-3/4	E-3/4	E-3/4	E-3/4	E-3/4	E-3/4	E-3/4
AVERAGE MONTHS IN CAREER FIELD	79	53	52	51	42	44	43	58
AVERAGE MONTHS IN SERVICE	89	61	71	59	52	51	49	65
PERCENT IN FIRST ENLISTMENT	25%	52%	67%	50%	64%	59%	67%	44%
PERCENT SUPERVISING	36%	14%	17%	12%	34%	21%	21%	30%
AVERAGE NUMBER TASKS PERFORMED	33	35	23	36	54	60	45	58

* Less than 1 percent

I. ADMINISTRATIVE SERVICES PERSONNEL CLUSTER (ST0075). The 169 airmen forming this group (10 percent of the survey sample) are primarily responsible for the general administrative functions of office operations, such as maintaining correspondence files, general typing, mail distribution, and administrative orders processing. Tasks typical of the average 31 tasks performed are:

maintaining supplies of forms and office materials
answering phones
making entries on AF Forms 80 (File Maintenance and
  Disposition Plan)
typing draft and final correspondence
establishing requirements for publications and forms

Of the 2 job variations within this cluster, 1 group (23 airmen) was notable in that members devoted more of their relative job time to tasks dealing with the control and distribution of forms and publications. With an average of over 5 years time in the career field, 70 percent of these airmen report holding a 5-skill level DAFSC, and reflect predominant grades of E-3, E-4, and E-5.

II. PERSONNEL SERVICES CLUSTER (ST0076). Comprising 7 percent of the survey sample, these 116 respondents spend 82 percent of their relative job time in the performance of tasks relating to medical squadron personnel functions, and the general administrative actions associated with personnel management activities. Their responsibilities include administration of squadron weight control and aerobics testing programs, leave administration, as well as processing organizational disciplinary actions. Some of the most representative of the average 49 tasks for this group are:

inprocessing or outprocessing squadron personnel
issuing and controlling meal cards
posting Daily Register of Transactions (DROT)
coordinating personnel actions concerning assigned personnel
  with CBPO
notifying personnel of appointments for miscellaneous testing
  or medical examinations

A small subgroup of 16 airmen perform a variation of the overall job of this group as a result of the concentration of time spent on tasks dealing with monitoring the APR/OER programs and the awards and decorations programs.

III. MEDICAL REFERENCE LIBRARY PERSONNEL (ST0193). The least experienced group in the survey sample (they report an average of less than 3 years in the career field), these incumbents perform a very limited job (averaging 23 tasks, with only 10 tasks accounting for over 50 percent of their relative job time). The basic job performed by these six airmen is best described by the

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performance of tasks such as ordering books and journals for medical libraries, cataloging medical books and journals, performing annual inventories of medical libraries, and making entries on AF Forms 194 (Library Balance Record).

IV. **UNIT TRAINING NCOs (ST0285)**. These 12 incumbents are responsible for a variety of training programs involving unit personnel. Their activities include monitoring on-the-job training (OJT) programs, general military training (GMT), and other ancillary training programs, as well as the maintenance of training and continuing education records. These relatively experienced NCOs (they average over 6 years in the career field) responded to training-oriented tasks such as:

> reviewing OJT records
> monitoring squadron OJT programs
> making entries on AF Forms 2096 (Classification/On-The-
>   Job Training Action)
> scoring tests
> administering tests
> evaluating effectiveness of training programs

V. **MEDICAL READINESS NCOs (ST0336)**. The 66 personnel forming this group (4 percent of the survey sample) are, like the previously discussed group, also responsible for some training activities. However, they focus their activities around the on-going medical readiness training programs. Along with their training duties, they are also responsible for drafting and developing contingency and disaster preparedness plans. Tasks which typify this group include:

> scheduling personnel for medical readiness and mobility
>   courses
> compiling and preparing unit exercise reports
> briefing mobility members on duties and responsibilities
> coordinating exercises and planning with other base agencies
> making entries on AF Forms 722 (USAF C-Level Data Collection)

VI. **SUPERVISORY PERSONNEL CLUSTER (ST0117)**. Spending 81 percent of their relative job time performing tasks pertaining to general supervisory, managerial, training, and administrative duties, 90 percent of these 282 incumbents report direct supervisory responsibilities. Personnel in this group reflect the highest experience level of all the groups identified (an average of over 11 years in the career field), and 70 percent report holding DAFSCs at the 7-skill level, 9-skill level, or CEM Code. With almost no basic technical task performance, typical supervisory and managerial-type tasks performed include:

determining work priorities
developing work methods or procedures
conducting OJT
indorsing airman performance reports (APR)
establishing performance standards for subordinates
directing preparation of reports, studies, or general
correspondence

Although there are identifiable job variations within this cluster, there is little distinction to be made of the jobs performed, other than the functions they supervise (i.e., Resource Management, Patient Administration, Personnel and Administrative Services).

VII. FACILITY MANAGEMENT PERSONNEL (STO220). The 32 experienced members of this group (an average of over 8 years in the career field, and predominantly E-5 and E-6 personnel) spend 69 percent of their relative duty time performing tasks relating to facilities management functions and associated administrative procedures. These job incumbents are responsible for ensuring that medical facilities provide the proper environment for both normal medical operations and planned contingencies. Examples of the tasks which define this group include:

coordinating maintenance of facilities with other agencies
making entries on AF Forms 332 (BCE Work Request)
following-up service calls for completed work
inspecting custodial supplied services
inspecting hospital or medical treatment facilities
writing work orders or requests for action by facilities
management

VIII. METHODS IMPROVEMENT PROGRAM NCOs (STO190). Identifying problem areas, finding more efficient ways to accomplish goals, and gauging organizational performance is the primary function of the 11 NCOs forming this group. These predominantly E-5 and E-6 personnel work with the Resources Management function and are involved in monitoring medical treatment facility (MTF) self-inspection programs, monitoring MTF suggestion programs, coordinating methods improvement crossfeeds with other sections, and implementing suggestion programs. Group members report an average of over 11 years in the career field and 55 percent hold a 7-skill level.

IX. MEDICAL EVALUATION BOARD (MEB) PERSONNEL (STO196). The 24 respondents forming this unique job are responsible for providing the full range of administrative support required for Medical Evaluation Board activities. Primarily 5-skill and 7-skill level personnel (58 percent and 38 percent, respectively), the job performed is best described by their response to tasks such as:

> compiling and reviewing case files of individuals meeting
>   medical boards
> counseling personnel meeting medical boards on rights and
>   benefits
> making entries on AF Forms 618 (Medical Board Report)
> scheduling medical boards
> performing MEB recorder duties

X. MEDICAL INFORMATION SYSTEMS PERSONNEL (ST0219). Representing 2 percent of the survey sample, these 28 airmen perform a highly specialized job revolving around computer systems operations. Devoting 74 percent of their relative job time to tasks pertaining to medical information systems (computer) functions and associated administrative tasks, these predominantly E-4 and E-5 personnel cover a wide range of computer-oriented activities. Tasks which best characterize the nature and scope of the job performed include arranging for repair of computer systems, maintaining both hardware and software inventories, conducting ADP user training, providing network hardware and software technical assistance, as well as performing operator maintenance on hardware.

XI. RESOURCES MANAGEMENT PERSONNEL CLUSTER (ST0046). The 109 airmen comprising this group (7 percent of the survey sample) are assigned primarily to the Resource Management Office of medical facilities, which is responsible for managing financial programs and funds, organizational development programs, manpower programs, as well as data collection, reporting, and statistical analysis. These predominantly 5-skill level airmen (77 percent) devote 87 percent of their relative duty time to tasks relating to resource management functions and the supporting administrative procedures. Typical time-consuming tasks representative of this group include:

> performing audits for report of patients
> collecting payment for treatment furnished
> making entries on AF Forms 1127 (Hospital Invoice/
>   Receipt/Account Receivable Record)
> maintaining change funds
> making entries on AF Forms 235 series (Report of Patients...)
> preparing monthly reports

Although the 2 job variations within this cluster performed a number of tasks in common, 1 of the groups (62 members) was distinguished by the amount of time spent on tasks pertaining to data collection, reporting, and analysis.

XII. HEALTH BENEFITS ADVISORS (ST0199). The job performed by these 12 respondents is very narrow in scope (only 9 tasks account for over 50 percent of their relative job time). They are responsible for assisting military personnel and their dependents in dealing with the various aspects of the

Uniformed Services Health Benefits Program (USHBP), and all other health programs available to military members, former members, and their eligible dependents. Tasks which clearly define the unique nature of this job include:

> issuing nonavailability statements
> advising personnel on Civilian Health and Medical Programs
>   of the Uniformed Services (CHAMPUS) entitlements
> making entries on AF Forms 676 (Authorization for Supple-
>   mental Civilian Health Services)
> maintaining nonavailability statement logs
> determining eligibility for treatment

XIII. APPOINTMENTS PERSONNEL CLUSTER (STO099). Operation of the medical facility appointment systems is the primary function of the 40 incumbents forming this group. The vast majority of these airmen report holding a 5-skill level DAFSC (83 percent), and 50 percent indicate they are in their first enlistment. Performing an average of 36 tasks, those tasks which clearly characterize the job performed include:

> scheduling appointments
> greeting patients
> answering phones
> making entries on AF Forms 250 (Health Record Charge Out
>   Request)
> entering patient data into computer terminals
> scheduling follow-up treatments

While three job variations could be identified within the cluster, many tasks were performed in common and very little significant difference between the groups was discernible. The primary distinction was in one of the group's (16 members) low response to tasks pertaining to information desk and receptionist duties.

XIV. OUTPATIENT RECORDS PERSONNEL CLUSTER (STO064). Representing 18 percent of the survey sample (the largest group identified - 301 members), these relatively junior personnel (they average less than 4 years time in the career field) are responsible for maintaining, filing, and retiring outpatient health records. Comprised predominantly of airmen in grades E-3 and E-4, 64 percent are in their first enlistment, and 45 percent are still in the first-job group (1-24 months total service). Seventy-seven percent of their relative job time is spent on tasks pertaining to outpatient records functions and the completion of administrative forms or documents associated with these health records. Performing an average of 54 tasks, representative tasks include:

filing and charging out medical records
screening and filing forms in medical records
preparing outpatient records for physicians and clinics
retiring outpatient medical records and index cards

Of the three job variations identified within this cluster, only one was somewhat different from the overall cluster description. The smallest group (10 members) tended to concentrate their relative job time on tasks limited to basic record filing activities.

XV. ADMISSIONS AND DISPOSITIONS PERSONNEL CLUSTER (ST0092). The 118 airmen forming this group are responsible for initiating and completing hospital or quarters patient admission and disposition paperwork. These primarily 5-skill level DAFSC personnel (80 percent) devote 65 percent of their relative duty time to tasks pertaining to the admissions and dispositions functions and the associated paperwork supporting those activities. An additional 16 percent of their relative duty time was spent performing patient affairs function tasks. Reporting predominantly E-3 and E-4 paygrades (59 percent are still in their first enlistment), they perform an average of 60 tasks. Some of the tasks representative of the group are:

preparing identification bands for patients
preparing admissions and dispositions (A&D) lists
updating current bed status
clearing patients from hospitals
admitting or discharging patients using Automated Quality
    Care Evaluation Support System (AQCESS)
making entries on AF Form 146 (Death Tag)
annotating medical and dental records to identify
    third party liability

Three job variations were found within the cluster. Although performing many tasks common to the overall cluster, one of the variations (10 members) was distinctive due to the amount of time spent on tasks involving third party liability procedures. Another small group (6 members) of more senior airmen was noted due to the time spent on tasks dealing with deceased patients.

XVI. CLINICAL (INPATIENT) RECORDS PERSONNEL CLUSTER (ST0039). Spending 74 percent of their relative duty time on tasks pertaining to clinical records and ward clerk functions, as well as the associated administrative forms required, the 75 respondents (5 percent of the survey sample) forming this group are responsible for the initiation, maintenance, filing, and disposition of clinical health records. These records are created for each patient admitted to the inpatient unit of a medical facility, for each live birth in a

medical facility, or for patients who die in transit. Sixty-seven percent of these predominantly E-3 and E-4 airmen are still in their first enlistment and 83 percent report a 5-skill level DAFSC. Tasks most commonly performed include:

> preparing medical records for committee's or physician's
>   review
> performing clinical records functions using AQCESS
> retiring inpatient medical records
> researching and transcribing surgical coding procedures
>   from ICDM-9-CM (Vol III)
> filing medical paperwork in individual clinical records
> researching and transcribing disease coding procedures
>   from International Classification of Diseases (ICD-9-CM
>   (Vol I and II)

Of the three job variations identified within this cluster, only one was somewhat different from the overall cluster description. This group's respondents (27 members) were physically located in the inpatient unit (ward) and performed some tasks that were peculiar to their location (i. e., delivering mail to patients; ordering patient's diets; and processing patient convalescent leaves or passes).

XVII. AEROMEDICAL EVACUATION PERSONNEL CLUSTER (ST0052). The 64 airmen forming this group are responsible for arranging and coordinating the airlift movement of military patients between medical facilities. These predominantly 5-skill level DAFSC personnel (76 percent) report devoting 58 percent of their relative duty time to patient affairs and general administrative tasks which are peculiar to the aeromedical evacuation process. An additional 25 percent of their duty time involves tasks pertaining to patient airlift center functions, air evacuation staging flight, or Armed Services Medical Regulating Office (ASMRO) operations. Tasks representative of this rather specialized job include:

> filing air evacuation mission documents
> making entries on AF Forms 230 (Request for Patient
>   Transfer)
> preparing patient manifests
> scheduling transportation for air evacuation patients
>   from hospital to flightline
> briefing departing patients

By and large, the two job variations within this cluster performed many tasks in common. However, one was distinctive due to the amount of time the 18 members spent on tasks relating to Aeromedical Evacuation Control Center (AECC) activities.

Comparisons of Specialty Jobs

Nine clusters and eight independent jobs were identified in the career ladder structure analysis. One cluster was comprised of jobs involving primarily supervisory, managerial, and training functions. The balance of the eight clusters and eight independent jobs represented separate and distinct activities within the career ladder. Each of these 16 entities is highly specialized and basically stands alone within the career ladder, with little or no significant overlap of common tasks performed with any of the other jobs (with the exception of such tasks as typing, general filing, and telephone duties). This high degree of specialization is the basis for the very diverse nature of this career ladder.

Comparison of Current Group Descriptions to Previous Survey Findings

The results of the specialty job analysis were compared to those of Occupational Survey Report (OSR) AFPT 90-906-409, MEDICAL ADMINISTRATIVE CAREER LADDER, dated July 1980. After reviewing the tasks comprising the jobs identified in 1980, most of the significant groups could be linked with similar task performances by 1989 sample groups. The few differences noted between comparable groups during the review can be attributed to modifications in the task list or to the analysis approach used.

There were four jobs identified in the current sample which did not have a direct match in the 1980 career ladder structure. Two of the groups with no apparent counterparts in the 1980 sample are noteworthy. One group, MEDICAL READINESS NCOs, brings 6 1/2 years of career ladder experience to a job which requires coordination of medical inputs and requirements with other base and civilian agencies involved in disaster preparedness and mobility planning. A second group, similarly experienced in the career ladder, devotes the majority of their job time to computer operations tasks. The other two previously unidentified jobs, MEDICAL REFERENCE LIBRARY PERSONNEL and METHODS IMPROVEMENT PROGRAM NCOs, represent only 1 percent of the survey sample and have very little impact on the career ladder as a whole in terms of numbers.

Aside from the above-mentioned variations, the vast majority of the current sample were found to be performing jobs identified in 1980, thus displaying a still diverse career ladder which has remained relatively stable over time.

ANALYSIS OF DAFSC GROUPS

An analysis of DAFSC groups, in conjunction with the analysis of the career ladder structure, is an important part of each occupational survey. The DAFSC analysis identifies differences in tasks performed at the various skill levels. This information may then be used to evaluate how well career ladder documents, such as AFR 39-1 Specialty Descriptions and the Specialty Training Standard (STS), reflect what career ladder personnel are actually doing in the field.

A comparison of the duty and task performance between DAFSCs 90630 and 90650 indicated that, while there are some minor differences, by and large, the jobs they perform are essentially the same. Therefore, they will be discussed as a combined group in this report. Similarly, DAFSC 90690 and CEM Code 90600 groups have also been combined for reporting purposes.

The distribution of skill-level groups across the career ladder jobs is displayed in Table 4, while Table 5 offers another perspective by displaying the relative percent time spent on each duty across the skill-level groups. A typical pattern of progression is present, with personnel spending more of their relative time on duties involving supervisory, managerial, and training tasks (see Table 5, Duties A, B, C, and D) as they move upward to the 9-skill level and CEM Code. It is also obvious, though, that 7-skill level personnel are still involved with technical task performance, as will be pointed out in the specific skill-level group discussions below.

Skill-Level Descriptions

DAFSCs 90630/90650. The 1,219 airmen in the 3- and 5-skill level group (representing 74 percent of the survey sample) performed an average of only 46 tasks. Performing a highly technical job, 86 percent of their relative duty time is devoted to tasks covering a wide variety of functions such as out-patient records, admissions and dispositions, medical squadron personnel, patient affairs, and resources management. As shown in Table 4, personnel in this group are represented in all of the jobs identified in the SPECIALTY JOBS section analysis, with 82 percent concentrated in the 16 nonsupervisory jobs identified. Table 6 displays selected representative time-consuming tasks performed by the highest percentages of these airmen. Table 7 displays those tasks which most clearly differentiate the 3-/5-skill level and 7-skill level groups. A review of all the tasks performed by group members revealed that only six tasks are performed by 40 percent or more of the group. This low number of common tasks performed by these airmen suggests a very diverse career ladder. This diversity is also evident when you review the group's dispersion across the specialty jobs (see Table 4).

DAFSC 90670. Seven-skill level personnel, representing 23 percent of the survey sample, perform an average of 73 tasks. Even though 72 percent of the group report supervisory responsibilities, only 36 percent of their relative job time is spent on tasks in the usual supervisory, managerial, and training duties (see Table 5). This relatively low supervisory activity is further highlighted by the fact that only 38 percent of the 374 people forming this group are found in the SUPERVISORY PERSONNEL CLUSTER discussed earlier in the SPECIALTY JOBS section (the one job that was predominantly supervisory in nature). The balance of the group's population, as was the case with the 3- and 5-skill level group, are spread across the wide range of jobs identified in the SPECIALTY JOBS section (see Table 4). While the display of tasks in Table 8 clearly shows these personnel are responsible for supervision, it also reflects the range and scope of the job, in that relatively high percentages of the group are also performing such basic technical tasks as typing drafts and final correspondence.

TABLE 4

DISTRIBUTION OF DAFSC GROUP MEMBERS ACROSS SPECIALTY JOBS

SPECIALTY JOBS	DAFSC 90630/90650 (N=1,219)		DAFSC 90670 (N=374)		DAFSC 90690/CEM CODE (N=64)	
	NUMBER	PERCENT	NUMBER	PERCENT	NUMBER	PERCENT
I. ADMINISTRATIVE SERVICES PERSONNEL CLUSTER	135	11%	33	9%	1	2%
II. PERSONNEL SERVICES CLUSTER	103	8%	13	3%	0	0%
III. MEDICAL REFERENCE LIBRARY PERSONNEL	6	*	0	0%	0	0%
IV. UNIT TRAINING NCOs	10	1%	1	*	1	2%
V. MEDICAL READINESS NCOs	40	3%	26	7%	0	0%
VI. SUPERVISORY PERSONNEL CLUSTER	86	7%	143	38%	53	83%
VII. FACILITY MANAGEMENT PERSONNEL	20	2%	12	3%	0	0%
VIII. METHODS IMPROVEMENT PROGRAM NCOs	5	*	6	2%	0	0%
IX. MEDICAL EVALUATION BOARD (MEB) PERSONNEL	14	1%	9	2%	1	2%
X. MEDICAL INFORMATION SYSTEMS PERSONNEL	19	2%	8	2%	1	2%
XI. RESOURCES MANAGEMENT PERSONNEL CLUSTER	96	8%	12	3%	1	2%
XII. HEALTH BENEFITS ADVISORS	11	1%	1	*	0	0%
XIII. APPOINTMENTS PERSONNEL CLUSTER	36	3%	4	1%	0	0%
XIV. OUTPATIENT RECORDS PERSONNEL CLUSTER	265	22%	36	10%	0	0%
XV. ADMISSIONS AND DISPOSITIONS PERSONNEL CLUSTER	109	9%	9	2%	0	0%
XVI. CLINICAL (INPATIENT) RECORDS PERSONNEL CLUSTER	70	6%	5	1%	0	0%
XVII. AEROMEDICAL EVACUATION PERSONNEL CLUSTER	54	4%	10	3%	0	0%
NOT GROUPED	140	11%	46	12%	6	9%

* Less than .5 percent

TABLE 5

AVERAGE PERCENT TIME SPENT PERFORMING DUTIES BY DAFSC GROUPS

DUTIES	DAFSC 90630/ 90650 (N=1,219)	DAFSC 90670 (N=374)	DAFSC 90690/ CEM CODE (N=64)
A ORGANIZING AND PLANNING	4	10	18
B DIRECTING AND IMPLEMENTING	5	11	19
C INSPECTING AND EVALUATING	2	7	13
D TRAINING	3	8	7
E PERFORMING GENERAL ADMINISTRATION FUNCTIONS	43	35	30
F PERFORMING PATIENT AFFAIRS FUNCTIONS	7	5	2
G PERFORMING ADMISSION AND DISPOSITION FUNCTIONS	5	2	*
H PERFORMING PATIENT AIRLIFT CENTER FUNCTIONS	1	1	0
I PERFORMING AIR EVACUATIONS STAGING FLIGHT OR ARMED SERVICES MEDICAL REGULATING OFFICE (ASMRO) OPERATIONS	*	*	*
J PERFORMING CLINICAL RECORDS FUNCTIONS	2	1	*
K PERFORMING MEDICAL EVALUATION BOARD FUNCTIONS	1	1	*
L PERFORMING MEDICAL SQUADRON PERSONNEL FUNCTIONS	4	2	3
M PERFORMING OUTPATIENT RECORDS FUNCTIONS	14	5	*
N PERFORMING PATIENT SQUADRON FUNCTIONS	*	*	*
O PERFORMING WARD CLERK FUNCTIONS	1	*	0
P PERFORMING RESOURCES MANAGEMENT FUNCTIONS	4	4	2
Q PERFORMING ADMINISTRATIVE ACTIONS AT MAJOR COMMAND LEVELS	*	1	2
R PERFORMING FACILITIES MANAGEMENT FUNCTIONS	1	2	*
S PERFORMING MEDICAL READINESS FUNCTIONS	1	3	2
T PERFORMING MEDICAL INFORMATION SYSTEM FUNCTIONS	2	2	2

* Less than .5 percent

TABLE 6

REPRESENTATIVE TASKS PERFORMED BY
90630/90650 PERSONNEL
(N=1,219)

TASKS		PERCENT MEMBERS PERFORMING
E107	ANSWER PHONES	93
E130	HAND-CARRY FORMS TO OTHER OFFICES	49
E137	MAINTAIN OFFICE FILES OF RECORDS, FORMS, CORRESPONDENCE, OR REPORTS	45
E139	MAINTAIN SUPPLIES OF FORMS AND OFFICE MATERIALS	43
E290	TYPE FINALS OF CORRESPONDENCE	40
E289	TYPE DRAFTS OF CORRESPONDENCE	40
E266	ORDER OFFICE SUPPLIES AND EQUIPMENT	37
E114	COMPLETE PATIENT IDENTIFICATION DATA ON MEDICAL FORMS	37
E273	PREPARE MONTHLY REPORTS	36
E186	MAKE ENTRIES ON AF FORMS 3078 (WEEKLY PERSONNEL TIME AND SALARY DISTRIBUTION WORKSHEET)	36
E126	DISTRIBUTE CORRESPONDENCE, REPORTS, OR DIRECTIVES	35
E129	GREET INCOMING VISITORS	34
E185	MAKE ENTRIES ON AF FORMS 250 (HEALTH RECORD CHARGE OUT REQUEST	34
E284	REVIEW INCOMING AND OUTGOING CORRESPONDENCE	32
E127	ESTABLISH AND MAINTAIN SUSPENSE SYSTEMS	31
M510	FILE AND CHARGE OUT MEDICAL RECORDS	31
M514	GREET PATIENTS	29
E260	MAKE ENTRIES ON SF FORMS 600 (HEALTH RECORD-CHRONOLOGICAL RECORD OF MEDICAL CARE)	29
E281	RETRIEVE PATIENT DATA FROM COMPUTER TERMINALS	26
M509	CREATE MEDICAL RECORDS FOR NEW PATIENTS	26
M536	SCREEN AND FILE FORMS IN MEDICAL RECORDS	25
F312	ENTER PATIENT DATA INTO COMPUTER TERMINALS	24

Average number of tasks performed - 46

TABLE 7

TASKS WHICH BEST DIFFERENTIATE BETWEEN
DAFSC 90630/90650 AND 90670 PERSONNEL
(PERCENT MEMBERS PERFORMING)

TASKS		DAFSC 90630/50 (N=1,219)	DAFSC 90670 (N=374)	DIFF
E130	HAND-CARRY FORMS TO OTHER OFFICES	49	32	+17
E114	COMPLETE PATIENT IDENTIFICATION DATA ON MEDICAL FORMS	37	21	+16
M510	FILE AND CHARGE OUT MEDICAL RECORDS	31	19	+12
M509	CREATE MEDICAL RECORDS FOR NEW PATIENTS	26	14	+12
M536	SCREEN AND FILE FORMS IN MEDICAL RECORDS	25	14	+11
E185	MAKE ENTRIES ON AF FORMS 250 (HEALTH RECORD CHARGE OUT REQUEST)	34	24	+10
F312	ENTER PATIENT DATA INTO COMPUTER TERMINALS	24	16	+ 8
C72	WRITE APRs	19	69	-50
B24	COUNSEL PERSONNEL ON PERSONAL OR MILITARY-RELATED PROBLEMS	19	67	-48
A4	DETERMINE WORK PRIORITIES	34	78	-44
A10	ESTABLISH PERFORMANCE STANDARDS FOR SUBORDINATES	14	56	-42
B42	EDIT CORRESPONDENCE	19	55	-36
D100	REVIEW OJT RECORDS	14	50	-36
E284	REVIEW INCOMING AND OUTGOING CORRESPONDENCE	32	58	-26
E273	PREPARE MONTHLY REPORTS	36	51	-15

TABLE 8

REPRESENTATIVE TASKS PERFORMED BY 90670 PERSONNEL
(N=374)

TASKS		PERCENT MEMBERS PERFORMING
E107	ANSWER PHONES	93
A4	DETERMINE WORK PRIORITIES	78
C72	WRITE APRs	69
B24	COUNSEL PERSONNEL ON PERSONAL OR MILITARY-RELATED PROBLEMS	67
A18	REVIEW REGULATIONS, MANUALS, OR OTHER UNIT PUBLICATIONS	64
A6	DEVELOP WORK METHODS OR PROCEDURES	62
E289	TYPE DRAFTS OF CORRESPONDENCE	59
E115	CONDUCT ADMINISTRATIVE SELF-INSPECTIONS	59
E290	TYPE FINALS OF CORRESPONDENCE	58
E284	REVIEW INCOMING AND OUTGOING CORRESPONDENCE	58
A10	ESTABLISH PERFORMANCE STANDARDS FOR SUBORDINATES	56
B42	EDIT CORRESPONDENCE	55
A14	PLAN OR SCHEDULE WORK ASSIGNMENTS	55
A3	DETERMINE REQUIREMENTS FOR SPACE, PERSONNEL, EQUIPMENT OR, SUPPLIES	53
B52	ORIENT INCOMING PERSONNEL	53
B40	DIRECT REQUISITION OF OFFICE SUPPLIES OR EQUIPMENT	52
E273	PREPARE MONTHLY REPORTS	51
E266	ORDER OFFICE SUPPLIES AND EQUIPMENT	50
D100	REVIEW OJT RECORDS	50
D94	MAINTAIN TRAINING RECORDS, CHARTS, OR GRAPHS	49
C73	WRITE AWARDS AND DECORATION RECOMMENDATIONS	47
D82	CONDUCT OJT	47
A20	SCHEDULE TDY, LEAVES, OR PASSES	43
E137	MAINTAIN OFFICE FILES OF RECORDS, FORMS, CORRESPONDENCE, OR REPORTS	43
C68	INDORSE AIRMAN PERFORMANCE REPORTS (APR)	41

Average number of tasks performed - 73

DAFSC 90690 and CEM Code 90600. As is typical of most career fields, personnel at the 9-skill and CEM Code levels reported performing primarily non-technical tasks. They performed an average of 74 tasks, with 49 tasks accounting for over 50 percent of their relative job time. Group members spent over 87 percent of their duty time on supervisory and training functions and managerial-type administrative tasks. Table 9 displays representative tasks for this group, while Table 10 presents tasks which reflect differences between these more senior NCOs and 7-skill level personnel. Table 5 displays the predominantly staff nature of these NCO's job and that these personnel are the primary managers in the career ladder.

Summary

Distinctions between skill level groups are evident, with personnel at the 3- and 5-skill levels spending the vast majority of their job time performing limited numbers of primarily technical tasks across a number of distinctly different jobs. At the 7-skill level, although members still spend over half of their relative duty time on nonsupervisory tasks, a shift toward supervisory functions is quite clear. The low numbers of tasks performed by 50 percent or more of the 3-/5-skill level group and the 7-skill level group (as well as the large number of different jobs in which they perform) suggests a very diverse career ladder for these personnel. Nine-skill level and CEM Code members are basically managers and supervisors, performing predominantly supervisory, managerial, and training tasks.

ANALYSIS OF AFR 39-1 SPECIALTY DESCRIPTIONS

Survey data were compared to the AFR 39-1 Specialty Descriptions for Medical Administrative Specialists and Supervisors, both dated 30 April 1989, and Medical Administrative Superintendent, dated 1 February 1988. These descriptions are intended to give a broad overview of the duties and tasks performed in each skill level of the specialty.

The specialty description for the Medical Administrative Supervisor and Medical Administrative Superintendent accurately reflect the combined supervisory and technical nature of the 7-skill level job and the managerial nature of the 9-skill level/CEM Code job. The Medical Administrative Specialist description also appears to be comprehensive and accurately portrays the broad range and technical nature of the job for 3- and 5-skill level personnel.

TRAINING ANALYSIS

Occupational survey data are one of the many sources of information which can be used to assist in the development of a training program relevant to the needs of personnel in their first enlistment. Factors which may be used in evaluating training include the overall description of the job being performed

TABLE 9

REPRESENTATIVE TASKS PERFORMED BY 90690/90600 PERSONNEL
(N=64)

TASKS		PERCENT MEMBERS PERFORMING
E107	ANSWER PHONES	94
C72	WRITE APRs	92
A18	REVIEW REGULATIONS, MANUALS, OR OTHER UNIT PUBLICATIONS	91
B24	COUNSEL PERSONNEL ON PERSONAL OR MILITARY-RELATED PROBLEMS	91
A4	DETERMINE WORK PRIORITIES	88
B50	INTERPRET POLICIES, DIRECTIVES, OR PROCEDURES FOR SUBORDINATES	86
A6	DEVELOP WORK METHODS OR PROCEDURES	83
C73	WRITE AWARDS AND DECORATION RECOMMENDATIONS	83
A10	ESTABLISH PERFORMANCE STANDARDS FOR SUBORDINATES	81
A14	PLAN OR SCHEDULE WORK ASSIGNMENTS	80
A1	ASSIGN PERSONNEL TO DUTY POSITIONS	80
B42	EDIT CORRESPONDENCE	80
B44	IMPLEMENT DIRECTIVES FROM HIGHER HEADQUARTERS	77
C68	INDORSE AIRMAN PERFORMANCE REPORTS (APR)	77
A13	PLAN MEETINGS, SUCH AS BRIEFINGS, CONFERENCES, OR STAFF STUDIES	67
C75	WRITE RECOMMENDATIONS FOR CORRECTING INSPECTION DEFICIENCIES	66
B23	CONDUCT STAFF MEETINGS	64
C61	EVALUATE INSPECTION REPORTS OR PROCEDURES FINDINGS	63
A20	SCHEDULE TDY, LEAVES, OR PASSES	63
A21	WRITE JOB DESCRIPTIONS	61
E110	AUTHENTICATE TDY ORDERS	61
E127	ESTABLISH AND MAINTAIN SUSPENSE SYSTEMS	58
B27	DIRECT MAINTENANCE OF REFERENCE OR MEDICAL LIBRARIES	56
B26	DIRECT MAINTENANCE OF MILITARY MAIL DISTRIBUTION SYSTEMS	52

Average number of tasks performed - 74

TABLE 10
TASKS WHICH BEST DIFFERENTIATE BETWEEN
DAFSC 90670 AND 90690/CEM CODE PERSONNEL
(PERCENT MEMBERS PERFORMING)

TASKS	DAFSC 90670 (N=374)	DAFSC 90690/ CEM CODE (N=64)	DIFF
E139 MAINTAIN SUPPLIES OF FORMS AND OFFICE MATERIALS	41	9	+32
E266 ORDER OFFICE SUPPLIES AND EQUIPMENT	50	25	+25
E281 RETRIEVE PATIENT DATA FROM COMPUTER TERMINALS	24	3	+21
E137 MAINTAIN OFFICE FILES OF RECORDS, FORMS, CORRESPONDENCE OR REPORTS	43	22	+21
E290 TYPE FINALS OF CORRESPONDENCE	58	38	+20
E210 MAKE ENTRIES ON AF FORMS 614 (CHARGE OUT RECORD)	30	19	+11
- -			
E110 AUTHENTICATE TDY ORDERS	21	61	-40
C68 INDORSE AIRMAN PERFORMANCE REPORTS (APR)	41	77	-36
B23 CONDUCT STAFF MEETINGS	33	64	-31
C60 EVALUATE INDIVIDUALS FOR PROMOTION, DEMOTION, OR RECLASSIFICATION	28	55	-27
A21 WRITE JOB DESCRIPTIONS	38	61	-23
B49 INITIATE PERSONNEL ACTION REQUESTS	29	50	-21
A20 SCHEDULE TDY, LEAVES, OR PASSES	43	63	-20

by first-enlistment personnel and their overall distribution across career ladder jobs, percentages of first-job (1-24 month TAFMS) or first-enlistment (1-48 months TAFMS) members performing specific tasks or using certain equipment or materials, as well as training emphasis and task difficulty ratings (previously explained in the SURVEY METHODOLOGY section).

To assist specifically in the evaluation of the Specialty Training Standard (STS) and the Plan of Instruction (POI), technical school personnel from Sheppard Technical Training Center matched job inventory tasks to appropriate sections and subsections of the STS and POI for course J3ABR90630 000. It was this matching upon which comparison to those documents was based. A complete computer listing displaying the percent members performing tasks, training emphasis and task difficulty ratings for each task, along with the STS and POI matchings, has been forwarded to the technical school for their use in further detailed reviews of training documents. A summary of this information is presented below.

First-Enlistment Personnel

In this study, there are 696 members in their first enlistment (1-48 months TAFMS), representing over 42 percent of the total survey sample. The job performed by these personnel is highly technical in nature, accounting for approximately 92 percent of their relative duty time (see Table 11). While Table 11 shows that first-term airmen spend some of their job time in a variety of career ladder functional areas, the majority is concentrated on outpatient records, patient affairs, admissions and dispositions, and associated general administrative functions. Distribution of these personnel in the career ladder jobs is displayed in Figure 2, which clearly shows group members dispersed across a number of the larger groups identified in the SPECIALTY JOBS analysis. Table 12 displays some of the average 39 tasks performed by the group, and, by virtue of the relatively low percentage performing any given task, also reflects the diversity of the career field.

One of the objectives of this survey project was to gather data for the technical training center pertaining to various technical training courses completed, equipment used or operated, types of facilities to which assigned, as well as responses to tasks associated with Automated Quality of Care Evaluation Support System (AQCESS) and Medical Expense and Performance Reporting System (MEPRS). Accordingly, Tables 13 through 16 present percentages of first-term airmen (as well as other groupings) responding to questions or tasks involving these areas. This type of information is useful for both the technical school and MAJCOM training personnel to assist them in focusing limited training time or other resources on the most appropriate subject areas.

Training Emphasis and Task Difficulty Data

Training emphasis (TE) and task difficulty (TD) data are secondary factors that can assist technical school personnel in deciding what tasks should be emphasized in entry-level training. These ratings, based on the judgments of senior career ladder NCOs working at operational units in the

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TABLE 11

RELATIVE TIME SPENT ON DUTIES BY
FIRST-ENLISTMENT PERSONNEL

DUTIES	PERCENT TIME SPENT
A ORGANIZING AND PLANNING	3
B DIRECTING AND IMPLEMENTING	3
C INSPECTING AND EVALUATING	1
D TRAINING	1
E PERFORMING GENERAL ADMINISTRATION FUNCTIONS	44
F PERFORMING PATIENT AFFAIRS FUNCTIONS	8
G PERFORMING ADMISSION AND DISPOSITION FUNCTIONS	6
H PERFORMING PATIENT AIRLIFT CENTER FUNCTIONS	1
I PERFORMING AIR EVACUATIONS STAGING FLIGHT OR ARMED SERVICES MEDICAL REGULATING OFFICE (ASMRO) OPERATIONS	1
J PERFORMING CLINICAL RECORDS FUNCTIONS	3
K PERFORMING MEDICAL EVALUATION BOARD FUNCTIONS	*
L PERFORMING MEDICAL SQUADRON PERSONNEL FUNCTIONS	4
M PERFORMING OUTPATIENT RECORDS FUNCTIONS	19
N PERFORMING PATIENT SQUADRON FUNCTIONS	*
O PERFORMING WARD CLERK FUNCTIONS	1
P PERFORMING RESOURCES MANAGEMENT FUNCTIONS	3
Q PERFORMING ADMINISTRATIVE ACTIONS AT MAJOR COMMAND LEVELS	*
R PERFORMING FACILITIES MANAGEMENT FUNCTIONS	*
S PERFORMING MEDICAL READINESS FUNCTIONS	1
T PERFORMING MEDICAL INFORMATION SYSTEM FUNCTIONS	1

* Less than .5 percent

DISTRIBUTION OF AFSC 906X0 FIRST-ENLISTMENT PERSONNEL ACROSS LARGER SPECIALTY JOBS
(N=696)

RESOURCES MGMT PERS 6%

ADMISSIONS & DISPOSITIONS PERS 10%

AEROMEDICAL EVACUATION PERS 4%

APPOINTMENTS PERS 3%

CLINICAL (INPATIENT) RECORDS PERS 7%

OUTPATIENT RECORDS PERS 28%

PERSONNEL SERVICES 9%

MEDICAL READINESS NCOs 2%

ADMIN SERVICES PERS 11%

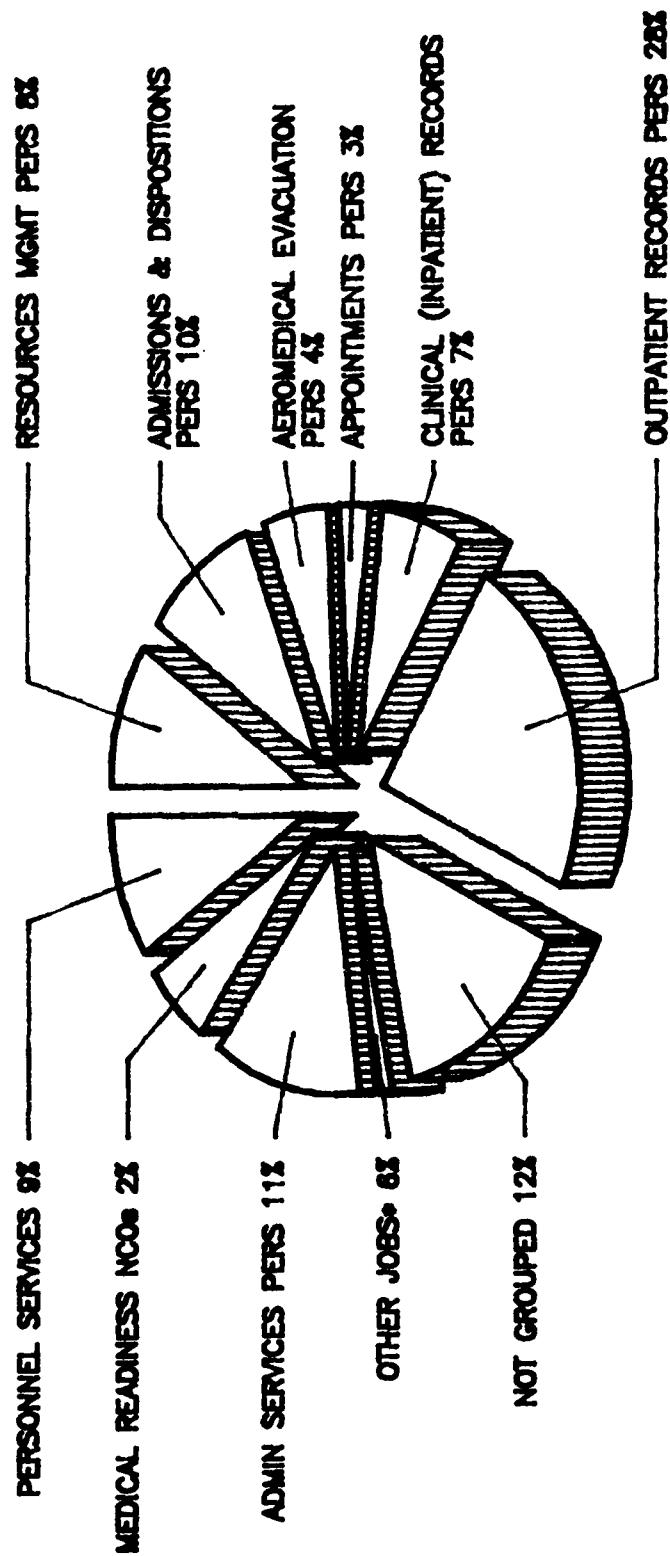OTHER JOBS* 6%

NOT GROUPED 12%

Figure 2

* Jobs with 1 percent or less first-enlistment personnel

30

TABLE 12

REPRESENTATIVE TASKS PERFORMED
BY 906X0 FIRST-ENLISTMENT PERSONNEL
(N=696)

TASKS		PERCENT MEMBERS PERFORMING
E107	ANSWER PHONES	91
E130	HAND-CARRY FORMS TO OTHER OFFICES	52
E137	MAINTAIN OFFICE FILES OF RECORDS, FORMS, CORRESPONDENCE, OR REPORTS	42
E114	COMPLETE PATIENT IDENTIFICATION DATA ON MEDICAL FORMS	42
E139	MAINTAIN SUPPLIES OF FORMS AND OFFICE MATERIALS	40
E185	MAKE ENTRIES ON AF FORMS 250 (HEALTH RECORD CHARGE OUT REQUEST)	38
M510	FILE AND CHARGE OUT MEDICAL RECORDS	37
M514	GREET PATIENTS	35
M511	FILE LOOSE PAPERWORK USING MEDICAL RECORD CHARGEOUT GUIDES	33
E129	GREET INCOMING VISITORS	33
E289	TYPE DRAFTS OF CORRESPONDENCE	32
E260	MAKE ENTRIES ON SF FORMS 600 (HEALTH RECORD-CHRONOLOGICAL RECORD OF MEDICAL CARE)	32
M540	SEARCH FOR MISPLACED MEDICAL RECORDS	32
M509	CREATE MEDICAL RECORDS FOR NEW PATIENTS	31
E290	TYPE FINALS OF CORRESPONDENCE	31
E266	ORDER OFFICE SUPPLIES AND EQUIPMENT	31
E126	DISTRIBUTE CORRESPONDENCE, REPORTS, OR DIRECTIVES	29
M536	SCREEN AND FILE FORMS IN MEDICAL RECORDS	29
E273	PREPARE MONTHLY REPORTS	29
E186	MAKE ENTRIES ON AF FORMS 3078 (WEEKLY PERSONNEL TIME AND SALARY DISTRIBUTION WORKSHEET)	28
M543	VERIFY PATIENT ELIGIBILITY USING DEERS AND MILITARY ID CARDS	27
E281	RETRIEVE PATIENT DATA FROM COMPUTER TERMINALS	27
M526	PREPARE OUTPATIENT RECORDS FOR PHYSICIANS AND CLINICS	26
M541	SEARCH WORLDWIDE LOCATORS FOR PATIENT IDENTIFICATION AND LOCATION	26
F312	ENTER PATIENT DATA INTO COMPUTER TERMINALS	25
E127	ESTABLISH AND MAINTAIN SUSPENSE SYSTEMS	25
M512	FORWARD APPOINTMENT SHEETS AND MEDICAL RECORDS TO CLINICS	25
E210	MAKE ENTRIES ON AF FORMS 614 (CHARGE OUT RECORD)	24
F310	DETERMINE ELIGIBILITY FOR TREATMENT	24
M533	RETIRE OUTPATIENT MEDICAL RECORDS AND INDEX CARDS	24
M537	SCREEN INCOMING MEDICAL RECORDS	23

Average number of tasks performed - 39

TABLE 13

FORMAL TECHNICAL TRAINING COURSES COMPLETED
(PERCENT MEMBERS RESPONDING)

COURSES COMPLETED	1ST JOB (N=327)	1ST ENL (N=696)	DAFSC 90650 (N=1,017)	DAFSC 90670 (N=374)	TOTAL SAMPLE (N=1,657)
J3AQR90010, MEDICAL SERVICE FUNDAMENTALS	8	6	6	29	13
J3AQR90030, BASIC MEDICAL READINESS	39	34	20	11	19
J3ABR90630, MEDICAL ADMINISTRATIVE SPECIALIST	94	91	82	69	79
J3AZR90670-1, MEDICAL RESOURCE MANAGEMENT	*	1	3	19	7
J3AZR90670-3, HOSPITAL UNIT MANAGEMENT	*	*	*	2	1
J3AZR90670-4, MEDICAL RECORDS MANAGEMENT/DATA ANALYSIS/AUDIT	2	3	5	14	7
J3AZR90670-5, HOSPITAL PLANT MANAGEMENT	*	*	1	7	3
J3AZR90670-7, MEDICAL EXPENSE AND PERFORMANCE REPORTING (MEPR) SYSTEM	1	2	5	10	5
J3AZR90670-8, AUTOMATED SOURCE DATA COLLECTION	*	1	3	6	4

* Less than 1 percent

TABLE 14

EQUIPMENT USED OR OPERATED BY
FIRST-ENLISTMENT PERSONNEL IN PRESENT JOB
(1-48 MONTHS TAFMS)

EQUIPMENT	PERCENT MEMBERS RESPONDING (N=696)
COPYING MACHINES	87
ELECTRIC TYPEWRITERS	86
PAGING AND INTERCOM SYSTEMS	41
MICROCOMPUTERS	40
WORD PROCESSORS	39
MICROFILE/MICROFICHE EQUIPMENT	32
EMBOSSERS	31
CALCULATORS	30
REMOTE KEYBOARD TERMINALS	24
ADDRESSOGRAPHS	14
MANUAL TYPEWRITERS	11
IMPRINTERS	7
ELECTRONIC MAIL SYSTEMS	7
PHOTOREPRODUCTION MACHINES	6
026 CARD PUNCHES	5
OMNIFAX MACHINES	4
ENGRAVERS	3
TELECOPIERS	3
VERIFIERS	1
GRAPHOTYPES	*
LITHOGRAPH MACHINES	*

* Less than 1 percent

TABLE 15

TYPE MEDICAL FACILITY TO WHICH ASSIGNED
(PERCENT MEMBERS RESPONDING)

FACILITY	1ST JOB (N=327)	1ST ENL (N=696)	DAFSC 90650 (N=1,017)	DAFSC 90670 (N=374)	TOTAL SAMPLE (N=1,657)
USAF CLINIC	13	14	16	21	16
USAF HOSPITAL	52	48	44	34	43
USAF MEDICAL CENTER	18	19	18	11	16
USAF REGIONAL HOSPITAL	10	12	13	11	12
USAF REGIONAL MEDICAL CENTER	2	3	4	4	4
USAF SCHOOL OF AEROSPACE MEDICINE	0	*	*	*	*

* Less than 1 percent

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TABLE 16

TASK RESPONSE DATA FOR MEDICAL EXPENSE AND PERFORMANCE REPORTING SYSTEM (MEPRS)
AND AUTOMATED QUALITY OF CARE EVALUATION SUPPORT SYSTEM (AQCESS)
(PERCENT MEMBERS RESPONDING)

PERTINENT TASKS	1ST JOB (N=327)	1ST ENL (N=696)	DAFSC 90650 (N=1,017)	DAFSC 90670 (N=374)	TOTAL SAMPLE (N=1,657)
MEPRS ORIENTED*					
E186 MAKE ENTRIES ON AF FORMS 3078 (WEEKLY PERSONNEL TIME AND SALARY DISTRIBUTION WORKSHEET)	21	28	39	46	39
E237 MAKE ENTRIES ON DD FORMS 2252 (DOD UNIFORM STAFFING REPORT)	0	0	0	0	0
P589 APPLY WORKLOAD STANDARDS AGAINST ACTUAL PRODUCTIVITY	2	3	4	10	5
P595 COMPILE DAILY INPATIENT AND OUTPATIENT WORKLOAD STATISTICS	3	3	4	5	4
P624 PREPARE AND REVIEW MEDICAL EXPENSE REPORT (RCS-HAF-(MQ)-7148))	0	2	3	3	3
P625 PREPARE EXPENSE DISTRIBUTION AND UNIT COST COMPUTATIONS	0	1	2	4	2
P641 VERIFY ACCURACY OF MEDICAL EXPENSE REPORT (RCS-HAF-(MQ)- 7148))	0	2	3	3	3
AQCESS ORIENTED					
G353 ADMIT OR DISCHARGE PATIENTS USING AUTOMATED QUALITY OF CARE EVALUATION SUPPORT SYSTEM (AQCESS)	13	14	14	9	12
J435 PERFORM CLINICAL RECORDS FUNCTION USING AQCESS	4	5	5	2	4

* These tasks were matched to STS para 15d by 906X0 subject-matter experts

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field, are collected to provide training personnel with a rank-ordering of those tasks in the job inventory considered important for first-term airman training (TE) (see Table 17 for the top rated tasks), along with a measure of the difficulty of the job inventory tasks (TD) (see the highest rated tasks presented in Table 18). When combined with data on the percentages of first-enlistment personnel performing tasks, comparisons can then be made to determine if training adjustments are necessary. For example, tasks receiving high ratings on both task factors, accompanied by moderate to high percentages performing, may warrant resident training. Those tasks receiving high task factor ratings, but low percentages performing, may be more appropriately planned for OJT programs within the career ladder. Low task factor ratings may highlight tasks best omitted from training for first-term personnel, but this decision must be weighed against percentages of personnel performing the tasks, command concerns, and criticality of the tasks. Various lists of tasks, accompanied by TE and TD ratings, are contained in the TRAINING EXTRACT package and should be reviewed in detail by technical school personnel. (For a more detailed explanation of TE and TD ratings, see Task Factor Administration in the SURVEY METHODOLOGY section of this report).

Specialty Training Standard (STS)

A comprehensive review of STS 906X0, dated January, 1986, compared STS items to survey data (based on the previously mentioned assistance from technical school personnel in matching job inventory tasks to STS elements). STS paragraphs containing general knowledge information, subject-matter-only knowledge requirements, or basic supervisory responsibilities were not examined. Task knowledge and performance elements of the STS were compared against the standard set forth in AFR 8-13 (dated 1 August 1986) and AFR 8-13/ATC Supplement 1 (dated 2 March 1987), Attachment 1, paragraph A1-3c(4) (i.e., include tasks performed or knowledge required by 20 percent or more of the personnel in a skill level (criterion group) of the AFS).

Using this criterion, a substantial portion of the STS was found to be unsupported by occupational survey data. The number of STS paragraphs or subparagraphs that did not meet the minimum 20 percent members performing criterion were too numerous to discuss in detail. However, a few selected samples are presented in Table 19 to display the scope of the problem (some rather significant functional areas of the career ladder are involved).

The large number of unsupported STS elements is largely due to the diversity of the career ladder. When an AFS population is spread across a large number of distinctly different jobs, very few tasks are performed in common across those jobs. For example, in this AFS, based on task performance responses, the job done by airmen working in resources management functions has very little in common with the job performed by respondents working in personnel and administrative services, outpatient records, or aeromedical evacuation functions. Consequently, when applying the usual standards against elements of the STS, many elements do not measure up.

TABLE 17

TECHNICAL TASKS RATED HIGHEST IN TRAINING EMPHASIS (TE)

TASKS		TNG EMPH*	PERCENT MEMBERS PERFORMING		TASK DIFF**
			1ST JOB (N=327)	1ST ENL (N=696)	
G370	PREPARE ADMISSION AND DISPOSITION (A&D) LISTS	6.27	12	14	4.99
M543	VERIFY PATIENT ELIGIBILITY USING DEERS AND MILITARY IDENTIFICATION CARDS	5.93	40	27	3.82
F312	ENTER PATIENT DATA INTO COMPUTER TERMINALS	5.85	24	25	4.40
G377	VERIFY ELIGIBILITY OF PATIENTS ADMITTED TO HOSPITAL	5.83	13	14	4.21
E114	COMPLETE PATIENT IDENTIFICATION DATA ON MEDICAL FORMS	5.73	46	42	3.01
M511	FILE LOOSE PAPERWORK USING MEDICAL RECORD CHARGEOUT GUIDES	5.73	45	33	3.42
G355	CLEAR PATIENTS FROM HOSPITALS	5.56	13	15	3.80
G360	MAINTAIN QUARTERS CASE FILES	5.54	7	10	4.03
E107	ANSWER PHONES	5.51	89	91	1.89
E137	MAINTAIN OFFICE FILES OF RECORDS, FORMS, CORRESPONDENCE, OR REPORTS	5.51	40	42	4.98
G353	AUDIT OR DISCHARGE PATIENTS USING AUTOMATED QUALITY EVALUATION SUPPORT SYSTEM (AQCESS)	5.49	40	42	5.09
M510	FILE AND CHARGE OUT MEDICAL RECORDS	5.49	48	37	3.08
M536	SCREEN AND FILE FORMS IN MEDICAL RECORDS	5.49	40	29	3.98
M509	CREATE MEDICAL RECORDS FOR NEW PATIENTS	5.41	42	31	3.54
E174	MAKE ENTRIES ON AF FORMS 2100 THRU 2190B (HEALTH RECORD - MEDICAL/DENTAL (VARIOUS COLORS))	5.39	26	21	3.33

* Mean TE rating is 2.00 and Standard Deviation is 1.46 (High TE=3.46)
** Average TD rating is 5.00

TABLE 18

TASKS RATED HIGHEST IN TASK DIFFICULTY (TD)

TASKS		TASK DIFF*	PERCENT MEMBERS PERFORMING		
			1ST ENL (N=696)	DAFSC 90650 (N=1,017)	DAFSC 90670 (N=374)
A7	DRAFT BUDGET OR FINANCIAL REQUIREMENTS	7.80	2	7	32
P627	PREPARE MANAGEMENT ANALYSES, SUCH AS COMPOSITE WORK UNITS (CWU) OR INTERPRETATION OF OTHER DATA, FOR COMMANDERS	7.63	1	2	4
A12	PLAN LAYOUT OF FACILITIES	7.33	2	3	10
B37	DIRECT OPERATION OF RESOURCES MANAGEMENT FUNCTIONS	7.33	2	5	17
C56	EVALUATE BUDGET OR FINANCIAL REQUIREMENTS	7.32	1	4	20
D88	DEVELOP RESIDENT COURSE OR CAREER DEVELOPMENT COURSE (CDC) CURRICULUM MATERIALS	7.21	1	2	2
T745	PROVIDE NETWORK HARDWARE AND SOFTWARE TECHNICAL ASSISTANCE	7.16	2	4	6
P630	PREPARE PROJECT FUNDS MANAGEMENT REPORTS	7.16	0	1	1
A8	DRAFT SUPPLEMENTS TO HIGHER HEADQUARTERS DIRECTIVES	7.05	2	4	13
P631	PREPARE RECOMMENDATIONS FOR MANAGEMENT ACTIONS BY COMMANDERS	7.03	0	1	6
T735	DEVELOP MEDICAL INFORMATION SYSTEMS COMPUTER PROGRAMS	7.02	2	3	8
Q647	CONDUCT HEALTH SERVICES MANAGEMENT INSPECTIONS (HSMI)	7.01	0	0	1
P624	PREPARE AND REVIEW MEDICAL EXPENSE REPORT (RCS-HAF-(MQ)-7148)	7.01	2	3	3
S731	WRITE MEDICAL ANNEXES TO CONTINGENCY PLANS, SUCH AS FIELD TRAINING EXERCISE PLANS	6.98	1	2	8
T737	INSTALL COMPUTER SYSTEMS	6.91	2	5	10
B31	DIRECT OPERATION OF MEDICAL BOARD ACTIVITIES	6.91	1	3	12

* Average TD rating is 5.00

TABLE 19

EXAMPLES OF SOME OF THE STS ELEMENTS NOT SUPPORTED BY SURVEY DATA
(LESS THAN 20 PERCENT MEMBERS PERFORMING)

| STS ITEM (WITH SELECTED MATCHED TASKS) | PERCENT MEMBERS PERFORMING | | | | | TNG EMPH* | TASK DIFF** |
	1ST JOB (N=327)	1ST ENL (N=696)	DAFSC 90650 (N=1,017)	DAFSC 90670 (N=374)			
10b PERFORM MEDICAL LIBRARY FUNCTIONS							
E113 CATALOG MEDICAL BOOKS AND JOURNALS	4	3	3	6		2.51	4.44
E267 PERFORM ANNUAL INVENTORIES OF MEDICAL LIBRARIES	2	2	3	7		2.37	5.41
13d PERFORM DUTIES ASSOCIATED WITH MEAL CARDS							
L481 ISSUE AND CONTROL MEAL CARDS	7	8	9	5		4.20	4.60
14f PERFORM DISPOSITION PROCEDURES							
E207 MAKE ENTRIES ON AF FORMS 577 (PATIENT'S CLEARANCE RECORD)	15	16	16	9		4.61	3.07
15b DETERMINE RATE AND METHOD OF COLLECTION FOR MEDICAL SERVICES							
P597 COMPUTE UNIT COSTS FOR HOSPITAL SERVICES PERFORMED	0	1	2	3		1.85	6.29

* Mean TE rating is 2.00 and Standard Deviation is 1.46 (High TE = 3.46)
** Average TD rating is 5.00

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The regulation referenced above provides some possible relief to the problem in this case. As stipulated in the above reference, in those AFSCs where 20 percent members performing is not a realistic cutoff point to justify an STS element, personnel responsible for the STS are advised to justify and establish an alternate cutoff point and document their rationale. The following are offered as some of the possible alternative approaches that ATC training personnel and career ladder functional managers may wish to consider:

1) Lower the cutoff of percent members using knowledge or performing a task (i.e., 10 percent, 5 percent....), giving an appropriate rationale for the change (i.e., the large number of unrelated jobs).

2) Use OSR data to determine if the tasks performed by less than 20 percent should be included in Column 1 of the STS because of high task difficulty ratings, safety factors, or high training emphasis ratings (see AFR 8-13/ATC Sup 1, Attachment 1, paragraph A1-3c(5)).

3) Authorize a line entry in the STS for each function of the career ladder (i.e., administrative services, resources management, admissions and dispositions, etc) regardless of the percentages performing given tasks. Then, using this more broadly defined approach by functional area, apply the provisions of AF 8-13, Section B, paragraph 12 and create an Air Force Job Qualification Standard to describe each distinct job or duty position found in the career ladder. This concept could be of invaluable assistance to personnel in the field responsible for OJT and to the OJT trainees themselves. OSR data are available to provide a comprehensive listing of the tasks performed in each of the jobs identified in the OSR.

Tasks not matched to any element of the STS are listed at the end of the STS computer listing. These were reviewed to determine if there were any tasks concentrated around any particular functions or jobs. No particular trends were noted. Examples of technical tasks performed by 20 percent or more respondents of the STS target groups, but which were not referenced to any STS element, are displayed in Table 20. Training personnel and subject-matter experts should review these and other eligible unreferenced tasks to determine if inclusion in the STS is justified. If one of the alternative cutoff procedures discussed above were to be utilized, evaluation of other tasks not referenced should also be accomplished using the modified measurement criteria selected.

Plan of Instruction (POI)

Based on the previously mentioned assistance from the technical school subject-matter experts in matching inventory tasks to the 3ABR90630 000 POI, dated 14 April 1988, a computer product was generated displaying the results of the matching process. Information furnished for consideration includes percent members performing data for first-job (1-24 months TAFMS) and first-enlistment (1-48 months TAFMS) personnel, as well as training emphasis (TE) and task difficulty (TD) ratings for individual tasks.

TABLE 20

EXAMPLES OF TECHNICAL TASKS PERFORMED BY 20 PERCENT OR MORE
GROUP MEMBERS AND NOT REFERENCED TO THE STS

| TASKS | | PERCENT MEMBERS PERFORMING | | | | TE RATING* | TD RATING** |
		1ST JOB (N=327)	1ST ENL (N=696)	DAFSC 90650 (N=1,017)	DAFSC 90670 (N=374)		
E248	MAKE ENTRIES ON DD FORMS 844 (REQUISITION FOR LOCAL DUPLICATING SERVICE)	12	17	24	30	3.66	3.17
M515	IDENTIFY RECORDS OF MILITARY INDIVIDUALS ON PERSONNEL RELIABILITY PROGRAMS (PRP)	28	21	15	11	5.07	3.70
M541	SEARCH WORLDWIDE LOCATORS FOR PATIENT IDENTIFICATION AND LOCATION	38	26	18	14	4.44	3.93
E276	PREPARE LETTERS OF APPOINTMENT	12	18	28	42	2.66	3.79
E277	PREPARE MINUTES OF MEETINGS	11	13	20	33	2.51	5.07
B42	EDIT CORRESPONDENCE	9	10	21	55	1.88	4.68
B283	REVIEW AND APPROVE FILE PLANS FOR OFFICES OF RECORD	3	3	8	20	1.32	5.94

* Mean TE rating is 2.00 and Standard Deviation is 1.46 (High TE = 3.46)
** Average TD rating is 5.00

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POI blocks, units of instruction, and criterion objectives were compared against the standard set forth in Attachment 1, ATCR 52-22, dated 17 February 1989 (30 percent or more of the criterion first-enlistment group performing tasks trained, along with sufficiently high TE and TD ratings on those tasks). Per this guidance, tasks trained in the course which do not meet these criteria must be considered for elimination from the formal course if not justified on some other acceptable basis.

Review of the tasks matched to the POI reveals that only a limited number of POI units of instruction or criterion objectives are supported by OSR data for matched tasks. Examples of these supported areas include medical materiel procedures, typing training, interpersonal relations, as well as outpatient and inpatient records instruction. Even though these areas are supported on the basis of the minimum percent members performing criterion, it should be noted that the vast majority of the tasks matched to these objectives reflected below average TD ratings. Thus, even these areas may be valid candidates for local OJT rather than consuming expensive formal course training time.

Examples of some of the units of instruction and criterion objectives with matched tasks which were not supported by OSR data are presented in Table 21. The sample tasks displayed are some of those with the highest percent members performing responses. While some of these tasks do reflect high TE ratings, it should be noted that the TD ratings are all less than the 5.00 average.

Based on these examples, it is evident that a substantial part of the formal course is not supported by the various OSR data elements which reflect responses from personnel working in the career ladder. Training personnel, career ladder managers, and subject-matter experts should perform an in-depth review of the entire course to determine which, if any, of the units of instruction can be justified for retention. Where retention cannot be supported by OSR data, alternative justification rationale for retention should be documented for future reference.

JOB SATISFACTION ANALYSIS

An examination of the job satisfaction indicators of various groups can give career ladder managers a better understanding of some of the factors which may affect the job performance of airmen in the career ladder. Attitude questions covering job interest, perceived utilization of talents and training, sense of accomplishment from work, and reenlistment intentions were included in the survey booklet to provide indications of job satisfaction. Table 22 presents job satisfaction data for AFSC 906X0 TAFMS groups, together with data for a comparative sample of Medical career ladders surveyed in 1988. These data can give a relative measure of how the job satisfaction of AFSC 906X0 personnel compares with other similar Air Force specialties. An indication of how job satisfaction perceptions have changed over time is provided in Table 23, where TAFMS group data for 1988 survey respondents is presented,

TABLE 21

EXAMPLES OF POI BLOCKS REFLECTING LOW FIRST-ENLISTMENT TASK PERFORMANCE
(LESS THAN 30 PERCENT RESPONDING)

POI REFERENCE BLOCK - UNIT	TIME (HOURS)	SELECTED SAMPLE TASKS	PERCENT MEMBERS PERFORMING 1ST JOB (N=327)	1ST ENL (N=696)	TNG EMPH*	TASK DIFF**
II	4a-e	12:00	P591 COLLECT PAYMENT FOR TREATMENT FURNISHED	6	8	3.34	4.49
			P590 COLLECT PATIENT VALUABLES	6	7	2.88	4.45
			F350 TURN IN RECEIVED MONIES	2	3	2.63	4.21
III	1a-e	6:00	E162 MAKE ENTRIES ON AF FORMS 1486 (UNIT LEAVE CONTROL LOG)	10	11	4.32	4.30
III	2a-f	11:00	E167 MAKE ENTRIES ON AF FORMS 764A (REQUISITION AND REQUIREMENT REQUEST)	5	6	2.02	4.03
IV	8a-b	10:00	G376 UPDATE PATIENT CONTROL FILE	6	6	4.54	4.26
			G370 PREPARE ADMISSION AND DISPOSITION (A&D) LISTS	12	14	6.27	4.99
IV	14a-e	11:00	E189 MAKE ENTRIES ON AF FORMS 348 (LINE OF DUTY DETERMINATION)	5	7	4.15	4.72
			E163 MAKE ENTRIES ON AF FORMS 1488 (DAILY LOG OF PATIENTS TREATED FOR INJURIES)	6	7	4.00	4.12

* Mean TE rating is 2.00 and Standard Deviation is 1.46 (High TE = 3.46)
** Average TD rating is 5.00

TABLE 22

COMPARISON OF JOB SATISFACTION INDICATORS BY TAFMS GROUPS
(PERCENT MEMBERS RESPONDING)*

	1-48 MOS TAFMS		49-96 MOS TAFMS		97+ MOS TAFMS	
	906X0 (N=696)	COMP SAMPLE** (N=870)	906X0 (N=441)	COMP SAMPLE** (N=383)	906X0 (N=520)	COMP SAMPLE** (N=623)
EXPRESSED JOB INTEREST:						
INTERESTING	65	84	65	86	76	86
SO-SO	20	10	20	8	15	8
DULL	14	5	14	4	9	5
PERCEIVED UTILIZATION OF TALENTS:						
FAIRLY WELL TO PERFECTLY	71	86	74	86	80	86
LITTLE OR NOT AT ALL	28	13	26	14	20	13
PERCEIVED UTILIZATION OF TRAINING:						
FAIRLY WELL TO PERFECTLY	74	89	70	87	77	84
LITTLE OR NOT AT ALL	24	10	29	13	23	16
REENLISTMENT INTENTIONS:						
YES, OR PROBABLY YES	64	59	70	75	74	72
NO, OR PROBABLY NO	33	40	29	25	8	8
PLAN TO RETIRE	***	***	0	0	17	20

* Columns may not add to 100 percent due to nonresponse or rounding
** Comparative sample of Medical career ladders surveyed in 1988 (Includes AFSCs 911X0, 914X1, 918X0, and 982X0)
*** Less than 1 percent

TABLE 23

COMPARISON OF CURRENT SURVEY AND 1980 906X0 TAFMS GROUPS
(PERCENT MEMBERS RESPONDING POSITIVELY)

JOB SATISFACTION INFORMATION:	1-48 MONTHS TAFMS		49-96 MONTHS TAFMS		97+ MONTHS TAFMS	
	1989 (N=696)	1980 (N=1,215)	1989 (N=441)	1980 (N=408)	1989 (N=520)	1980 (N=815)
JOB FAIRLY INTERESTING OR BETTER	65	57	65	65	76	77
TALENTS UTILIZED FAIRLY WELL OR BETTER	71	64	74	72	80	83
TRAINING UTILIZED FAIRLY WELL OR BETTER	74	69	70	71	77	74
FAVORABLY CONSIDERING REENLISTMENT	64	45	70	61	74	67

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along with data from respondents to the last occupational survey involving this career ladder, published in 1980. Finally, Table 24 presents job satisfaction responses for the specialty job groups discussed in the SPECIALTY JOBS section of this report. An examination of these data can show how overall job satisfaction may be influenced by the type of job performed.

Review of Table 22 reflects that responses from 906X0 TAFMS groups, while all satisfactorily positive (65 percent or more), are generally somewhat less than comparative groups in other Medical career ladders (one notable exception is the higher positive reenlistment intention indicated by the 906X0 1-48 months TAFMS group).

Comparison of job satisfaction indicator responses of current survey TAFMS groups to those in the 1980 survey (see Table 23) indicate that positive responses are almost all essentially equal to or higher than those for 1980 corresponding groups. The percentage of 1988 first-term personnel responding favorably to reenlistment is a considerable improvement over 1980 responses (64 percent versus 45 percent).

In the majority of the groups identified in the SPECIALTY JOBS analysis, members indicate that the jobs they perform are interesting, with 15 of the 17 groups showing 60 percent or better responding positively (see Table 24). It is noteworthy, however, that the group with the lowest positive response (OUTPATIENT RECORDS PERSONNEL CLUSTER - 45 percent) also represents the largest (18 percent of the survey sample) job identified. The MEDICAL REFERENCE LIBRARY PERSONNEL group (only .4 percent of the survey sample) was the only other group reporting less than a 60 percent positive response.

While all of the groups in the SPECIALTY JOBS analysis responded positively regarding the sense of accomplishment gained from their work, four of these groups were only in the 50 percent range (this number includes the two groups mentioned above). Responses to all the other job satisfaction indicators were very positive with the exception of reenlistment intentions indicated by the MEDICAL REFERENCE LIBRARY PERSONNEL group (see highlighted figures in Table 24).

Overall, the job satisfaction indicators for the groups identified in the SPECIALTY JOBS analysis section were high, with positive indications from the vast majority of the groups. Airmen forming the MEDICAL REFERENCE LIBRARY PERSONNEL job did reflect a trend of being less satisfied than their counterparts (see Table 24). Although the group is small (only .4 percent of the survey sample), it does represent an on-going job being performed (to some degree at least) at most medical treatment facilities across the Air Force. Personnel forming this group reflect the least experience of any of the groups (an average of only 33 months in the career field) and members responded to an average of only 23 tasks performed. The limited scope of the job and the relatively low expressed job interest and sense of accomplishment indicated by these airmen suggest that career ladder managers and supervisors should review this particular job to see if there is some alternative other than assigning younger airmen to these positions. Civilianization of positions in the medical libraries may be a viable option.

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TABLE 24

COMPARISONS OF JOB SATISFACTION INDICATORS BY SPECIALTY JOB CLUSTERS AND INDEPENDENT JOBS
(PERCENT MEMBERS RESPONDING)*

	ADMIN SERVICES PERSONNEL	PERSONNEL SERVICES	MEDICAL REFERENCE LIBRARY PERSONNEL	UNIT TNG NCOs	MEDICAL READINESS NCOs	SUPERVISORY PERSONNEL	FACILITY MGT PERSONNEL	METHODS IMPRVMT PROGRAM NCOs	MED EVAL BOARD PERSONNEL
EXPRESSED JOB INTEREST:									
INTERESTING	67	80	50	67	86	79	72	100	83
SO-SO	20	12	17	25	6	14	16	0	13
DULL	13	6	33	8	6	6	6	0	4
PERCEIVED UTILIZATION OF TALENTS:									
FAIRLY WELL TO PERFECTLY	66	84	67	75	89	85	84	100	96
LITTLE OR NOT AT ALL	33	15	33	25	9	15	16	0	4
PERCEIVED UTILIZATION OF TRAINING:									
FAIRLY WELL TO PERFECTLY	64	76	67	67	70	87	72	91	92
LITTLE OR NOT AT ALL	34	22	33	25	29	13	28	9	8
SENSE OF ACCOMPLISHMENT GAINED FROM WORK:									
SATISFIED	65	78	50	50	79	76	81	100	83
NEUTRAL	12	7	17	33	5	4	6	0	4
DISSATISFIED	21	14	33	8	15	20	9	0	13
REENLISTMENT INTENTIONS:									
YES, OR PROBABLY YES	72	73	(33)	67	71	69	84	91	67
NO, OR PROBABLY NO	24	23	67	33	18	12	13	9	12
PLAN TO RETIRE	2	2	0	0	8	18	3	0	21

* Columns may not add to 100 percent due to nonresponse or rounding

TABLE 24 (CONTINUED)

COMPARISONS OF JOB SATISFACTION INDICATORS BY SPECIALTY JOB CLUSTERS AND INDEPENDENT JOBS
(PERCENT MEMBERS RESPONDING)*

	MEDICAL INFO SYS PERSONNEL	RESOURCES MANAGEMENT PERSONNEL	HEALTH BENEFITS ADVISORS	APPOINTMENTS PERSONNEL	OUTPATIENT RECORDS PERSONNEL	ADMISSIONS AND DISPOSITIONS PERSONNEL	CLINICAL (INPATIENT) RECORDS PERSONNEL	AEROMED EVACUATION PERSONNEL
EXPRESSED JOB INTEREST:								
INTERESTING	92	74	75	60	45	75	73	70
SO-SO	4	18	17	30	30	14	21	20
DULL	4	8	8	10	24	11	4	8
PERCEIVED UTILIZATION OF TALENTS:								
FAIRLY WELL TO PERFECTLY	100	79	92	63	55	77	84	77
LITTLE OR NOT AT ALL	0	21	8	37	45	22	15	23
PERCEIVED UTILIZATION OF TRAINING:								
FAIRLY WELL TO PERFECTLY	61	77	55	55	70	86	81	67
LITTLE OR NOT AT ALL	39	23	9	45	29	12	16	33
SENSE OF ACCOMPLISHMENT GAINED FROM WORK:								
SATISFIED	86	73	92	53	52	67	73	69
NEUTRAL	7	13	0	17	16	17	12	15
DISSATISFIED	7	13	8	30	31	15	13	16
REENLISTMENT INTENTIONS:								
YES, OR PROBABLY YES	71	70	58	68	66	62	65	69
NO, OR PROBABLY NO	25	28	33	30	20	36	28	25
PLAN TO RETIRE	0	1	8	0	3	0	0	6

* Columns may not add to 100 percent due to nonresponse or rounding

When there are serious problems in a career ladder, survey respondents are usually quite free with write-in comments to complain about perceived problems in the field. Thirteen percent of the survey sample used the write-in feature to convey some type of information, yet only 10 percent of the comments received (representing only 1 percent of the total sample) could be construed as complaints. Although this number is not high, there is some cause for concern among career field managers and supervisors.

Most of the complaint-type write-in comments were of a general nature and too disparate to quantify. However, there was one topic that drew multiple complaints. The problem revolves around the very diverse nature of this career ladder. Since there are so many distinctly different jobs across the career ladder (see discussion in SPECIALTY JOBS section), personnel in the field feel they are being penalized when they take a Specialty Knowledge Test (SKT) because they work in so few of the various jobs. With limited exposure to the other aspects of the career ladder, they feel that in order to prepare for their SKT they must try to learn about the various other jobs in the field from "the books" (i.e., CDCs, regulations, etc.), since any significant job rotation is either impractical or is simply not done. This approach, they feel, is much harder than learning by doing the other jobs.

This concern is not new. These same type of complaints surfaced during the survey process in 1980 and were reported in the Occupational Survey Report of that year. It appears there has been no resolution to this perceived problem thus far.

IMPLICATIONS

This survey was requested by training personnel to obtain current task and equipment data for their use in evaluation of current training programs. In this particular career ladder, before appropriate training can be properly considered, the structure of the career ladder must be discussed.

The very diverse nature of the career ladder (some 17 distinctly different jobs were identified) allows management personnel great flexibility in terms of filling positions in the medical treatment facilities. This flexibility, however, appears to exact a cost in terms of efficient, cost-effective formal training programs.

As pointed out previously, based on OSR data, there is very little task commonality across the major jobs found. For example, airmen working in the Personnel Services functional area have essentially nothing in common with airmen working in Outpatient Records jobs. Thus, when you deliver training on personnel-type tasks, the probability is that only 9 percent of the trainees will work in a job applying that training (see first-enlistment personnel dispersal across jobs in Figure 2). Twenty-nine hours of medical terminology,

as well as anatomy and physiology instruction given to all students, also appears to be lost on formal course graduates who wind up working in Administrative Services (11 percent of first-termers), Resources Management (8 percent of first-enlistment personnel), as well as those in Personnel Services (9 percent). Thus, some 28 percent of the first-enlistment airmen receive training that, without an extensive job rotation program, may never be utilized; and, these jobs they perform are accomplished in most USAF organizations by 702X0, 732X0, and 67XXX career ladder personnel.

As long as 906X0 personnel are dispersed across so many different jobs, cost-efficient mass airman basic resident training does not appear to be practical. Perhaps career ladder managers, using the Air Force Job Qualification Standard concept, might consider working with training personnel to develop job-specific training modules packaged in some format (i.e., pamphlet, videotape) which could be made available to the field for use in individual or group training situations. This approach might also help resolve the perceived problem mentioned in the write-in comments about 906X0 troops being disadvantaged in preparing for their SKTs. With multiple "modules" available in the field, airmen, even though still working in only one major function, would have additional definitive material (beyond the general CDCs) to assist them in their studies.

The problem of comprehensive training for a career ladder structured like this one is not a simple one. Thus, attaining a quality solution will not be a simple task either. Career ladder managers and training personnel must work together to develop a training system that is both cost-effective and equitable to everyone, and at the same time allows medical organization management to get the job done.

APPENDIX A

SELECTED REPRESENTATIVE TASKS PERFORMED
BY CAREER LADDER STRUCTURE GROUPS

TABLE I

GROUP ID NUMBER AND TITLE: ST0075, ADMINISTRATIVE SERVICES PERSONNEL CLUSTER
GROUP SIZE: 169   PERCENT OF SAMPLE: 10%
PREDOMINANT GRADE: E-3/E-4/E-5   AVERAGE TICF: 61 MONTHS
AVERAGE TAFMS: 71 MONTHS

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
E107 ANSWER PHONES	98
E289 TYPE DRAFTS OF CORRESPONDENCE	82
E290 TYPE FINALS OF CORRESPONDENCE	80
E126 DISTRIBUTE CORRESPONDENCE, REPORTS, OR DIRECTIVES	76
E139 MAINTAIN SUPPLIES OF FORMS AND OFFICE MATERIALS	75
E137 MAINTAIN OFFICE FILES OF RECORDS, FORMS, CORRESPONDENCE, OR REPORTS	69
E130 HAND-CARRY FORMS TO OTHER OFFICES	63
E128 ESTABLISH REQUIREMENTS FOR PUBLICATIONS AND FORMS	62
E127 ESTABLISH AND MAINTAIN SUSPENSE SYSTEMS	60
E266 ORDER OFFICE SUPPLIES AND EQUIPMENT	59
E284 REVIEW INCOMING AND OUTGOING CORRESPONDENCE	56
A18 REVIEW REGULATIONS, MANUALS, OR OTHER UNIT PUBLICATIONS	49
E282 RETURN ERRONEOUSLY FORWARDED MAIL TO POST OFFICE	49
E220 MAKE ENTRIES ON AF FORMS 80 (FILES MAINTENANCE AND DISPOSITION PLAN)	45
E221 MAKE ENTRIES ON AF FORMS 82 (FILES DISPOSITION CONTROL LABEL)	45
E248 MAKE ENTRIES ON DD FORMS 844 (REQUISITION FOR LOCAL DUPLICATING SERVICE)	44
E273 PREPARE MONTHLY REPORTS	43
E129 GREET INCOMING VISITORS	42
E136 MAINTAIN MILITARY PUBLICATIONS LIBRARIES	41
E276 PREPARE LETTERS OF APPOINTMENT	40
E272 POST BULLETIN BOARDS	37
B42 EDIT CORRESPONDENCE	35
E115 CONDUCT ADMINISTRATIVE SELF-INSPECTIONS	34
A4 DETERMINE WORK PRIORITIES	32
E186 MAKE ENTRIES ON AF FORMS 3078 (WEEKLY PERSONNEL TIME AND SALARY DISTRIBUTION WORKSHEET)	31
B40 DIRECT REQUISITION OF OFFICE SUPPLIES OR EQUIPMENT	31
E112 BUNDLE MAIL	30
E288 TYPE DICTATED OR RECORDED CORRESPONDENCE	29
E138 MAINTAIN SECTION SUPPLY ACCOUNTS	27

TABLE II

GROUP ID NUMBER AND TITLE: ST0076, PERSONNEL SERVICES CLUSTER
GROUP SIZE: 116   PERCENT OF SAMPLE: 7%
PREDOMINANT GRADE: E-3/E-4/E-5   AVERAGE TICF: 52 MONTHS
AVERAGE TAFMS: 57 MONTHS

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
E107 ANSWER PHONES	94
L479 INPROCESS OR OUTPROCESS SQUADRON PERSONNEL	89
L470 ASSIGN LEAVE AUTHORIZATION NUMBERS ON APPROVED LEAVES FOR ASSIGNED PERSONNEL	84
E162 MAKE ENTRIES ON AF FORMS 1486 (UNIT LEAVE CONTROL LOG)	78
L481 ISSUE AND CONTROL MEAL CARDS	78
L471 CONDUCT INTRO PROGRAM FOR PROJECTED GAINS	71
E290 TYPE FINALS OF CORRESPONDENCE	70
L475 COORDINATE PERSONNEL ACTIONS CONCERNING ASSIGNED PERSONNEL WITH CONSOLIDATED BASE PERSONNEL OFFICE (CBPO)	69
L473 COORDINATE COMMANDER'S CALLS WITH COMMANDER OR OTHER AGENCIES	68
E127 ESTABLISH AND MAINTAIN SUSPENSE SYSTEMS	66
E289 TYPE DRAFTS OF CORRESPONDENCE	64
E177 MAKE ENTRIES ON AF FORMS 220 (REQUEST AUTHORIZATION AND PAY ORDER BAS - SEPARATE RATIONS)	64
L492 NOTIFY PERSONNEL OF APPOINTMENTS FOR MISCELLANEOUS TESTING OR MEDICAL EXAMINATIONS	64
E276 PREPARE LETTERS OF APPOINTMENT	64
B52 ORIENT INCOMING PERSONNEL	63
L495 POST DAILY REGISTER OF TRANSACTIONS (DROT)	63
L467 ADMINISTER AEROBICS TESTING PROGRAMS FOR ASSIGNED PERSONNEL	62
E272 POST BULLETIN BOARDS	62
E149 MAKE ENTRIES ON AF FORMS 1134 (UNIT LEAVE AUTHORIZATION NUMBERS--BLOCK ASSIGNMENTS)	61
L487 MONITOR APR AND OER PROGRAMS	59
E137 MAINTAIN OFFICE FILES OF RECORDS, FORMS, CORRESPONDENCE, OR REPORTS	59
E152 MAKE ENTRIES ON AF FORMS 1240 (PERSONNEL STATUS REPORT)	57
L496 PREPARE DISCIPLINARY PAPERWORK, SUCH AS ARTICLE 15, FOR ASSIGNED PERSONNEL	56
E126 DISTRIBUTE CORRESPONDENCE, REPORTS, OR DIRECTIVES	53
E284 REVIEW INCOMING AND OUTGOING CORRESPONDENCE	53
E130 HAND-CARRY FORMS TO OTHER OFFICES	52
L468 ADMINISTER WEIGHT CONTROL PROGRAMS FOR ASSIGNED PERSONNEL	52
E282 RETURN ERRONEOUSLY FORWARDED MAIL TO POST OFFICE	50

TABLE III

GROUP ID NUMBER AND TITLE: STO193, MEDICAL REFERENCE LIBRARY PERSONNEL
GROUP SIZE: 6   PERCENT OF SAMPLE: .4%
PREDOMINANT GRADE: E-4   AVERAGE TICF: 33 MONTHS
AVERAGE TAFMS: 35 MONTHS

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
E265 ORDER BOOKS AND JOURNALS FOR MEDICAL LIBRARIES	100
E134 MAINTAIN ACCOUNTABILITY FOR MEDICAL LIBRARY ITEMS, SUCH AS BOOKS OR JOURNALS	83
E107 ANSWER PHONES	83
E113 CATALOG MEDICAL BOOKS AND JOURNALS	83
E279 PREPARE SHELF LISTS FOR EACH MEDICAL LIBRARY ITEM	83
E289 TYPE DRAFTS OF CORRESPONDENCE	83
E290 TYPE FINALS OF CORRESPONDENCE	83
E267 PERFORM ANNUAL INVENTORIES OF MEDICAL LIBRARIES	83
E170 MAKE ENTRIES ON AF FORMS 194 (LIBRARY BALANCE RECORD)	83
E282 RETURN ERRONEOUSLY FORWARDED MAIL TO POST OFFICE	83
E108 ARRANGE INTERLIBRARY LOANS	83
E277 PREPARE MINUTES OF MEETINGS	67
E257 MAKE ENTRIES ON SF FORMS 162 (INTERLIBRARY LOAN REQUEST)	67
E137 MAINTAIN OFFICE FILES OF RECORDS, FORMS, CORRESPONDENCE, OR REPORTS	50
E112 BUNDLE MAIL	50
E223 MAKE ENTRIES ON AF FORMS 85 (INVENTORY ADJUSTMENT VOUCHER)	50
A20 SCHEDULE TDY, LEAVES, OR PASSES	33
E139 MAINTAIN SUPPLIES OF FORMS AND OFFICE MATERIALS	33
E273 PREPARE MONTHLY REPORTS	33
E118 CONDUCT MEETINGS	33
E266 ORDER OFFICE SUPPLIES AND EQUIPMENT	33
B40 DIRECT REQUISITION OF OFFICE SUPPLIES OR EQUIPMENT	33
E272 POST BULLETIN BOARDS	33
A7 DRAFT BUDGET OR FINANCIAL REQUIREMENTS	33
L470 ASSIGN LEAVE AUTHORIZATION NUMBERS ON APPROVED LEAVES FOR ASSIGNED PERSONNEL	33

TABLE IV

GROUP ID NUMBER AND TITLE: ST0285, UNIT TRAINING NCOs
GROUP SIZE: 12   PERCENT OF SAMPLE: .7%
PREDOMINANT GRADE: E-4/E-5   AVERAGE TICF: 73 MONTHS
AVERAGE TAFMS: 101 MONTHS

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
E107 ANSWER PHONES	100
D100 REVIEW OJT RECORDS	100
E173 MAKE ENTRIES ON AF FORMS 2096 (CLASSIFICATION/ON-THE-JOB- TRAINING ACTION)	100
D101 REVIEW TRAINING PROGRESS OF INDIVIDUALS	92
D89 DIRECT OR IMPLEMENT TRAINING PROGRAMS	92
D77 ADMINISTER TESTS	92
L491 MONITOR SQUADRON OJT PROGRAMS	83
D82 CONDUCT OJT	83
E277 PREPARE MINUTES OF MEETINGS	75
D91 EVALUATE OJT TRAINEES	75
D90 EVALUATE EFFECTIVENESS OF TRAINING PROGRAMS	75
D85 COUNSEL TRAINEES ON TRAINING PROGRESS	75
A13 PLAN MEETINGS, SUCH AS BRIEFINGS, CONFERENCES, OR STAFF STUDIES	67
D102 SCORE TESTS	67
E118 CONDUCT MEETINGS	67
L477 DOCUMENT ANCILIARY TRAINING RECORDS	58
D96 PLAN OJT	58
L492 NOTIFY PERSONNEL OF APPOINTMENTS FOR MISCELLANEOUS TESTING OR MEDICAL EXAMINATIONS	58
D95 PARTICIPATE IN TRAINING CONFERENCES OR BRIEFINGS	58
D130 HAND-CARRY FORMS TO OTHER OFFICES	58
B52 ORIENT INCOMING PERSONNEL	58
E186 MAKE ENTRIES ON AF FORMS 3078 (WEEKLY PERSONNEL TIME AND SALARY DISTRIBUTION WORKSHEET)	58
B23 CONDUCT STAFF MEETINGS	58
L479 INPROCESS OR OUTPROCESS SQUADRON PERSONNEL	58
E127 ESTABLISH AND MAINTAIN SUSPENSE SYSTEMS	50
D94 MAINTAIN TRAINING RECORDS, CHARTS, OR GRAPHS	50
L483 ISSUE AND CONTROL WEIGHTED AIRMAN PROMOTION SYSTEM (WAPS) STUDY MATERIALS	50
D97 PREPARE LESSON PLANS OR LECTURES	50
A20 SCHEDULE TDY, LEAVES, OR PASSES	50
E129 GREET INCOMING VISITORS	50

TABLE V

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
S712 BRIEF ASSIGNED PERSONNEL ON DISASTER PREPAREDNESS AND WARTIME MISSIONS	95
S714 COMPILE AND PREPARE UNIT EXERCISE REPORTS	95
S720 DEVELOP MOBILITY AND UNIT RECALL ROSTERS	89
S730 SCHEDULE PERSONNEL FOR MEDICAL READINESS AND MOBILITY COURSES	89
S723 MAINTAIN AND UPDATE CLASSIFIED MEDICAL READINESS PLANS	86
S717 COORDINATE EXERCISES AND PLANNING WITH OTHER BASE AGENCIES	86
S721 DRAFT AND DEVELOP CONTINGENCY AND DISASTER PREPAREDNESS PLANS	85
S715 COMPILE AND PREPARE UNIT REPRESENTATIVE (UNITREP) REPORTS	85
E106 ANNOTATE, STORE, AND DESTROY CLASSIFIED MATERIALS	83
S713 BRIEF MOBILITY MEMBERS ON DUTIES AND RESPONSIBILITIES	80
S722 EVALUATE EFFECTIVENESS OF IMPLEMENTED MEDICAL READINESS PLANS	79
A18 REVIEW REGULATIONS, MANUALS, OR OTHER UNIT PUBLICATIONS	76
S719 DEVELOP FACILITY DISASTER CASUALTY CONTROL PROGRAMS	74
S711 ASSIGN PERSONNEL TO MOBILITY POSITIONS	74
E289 TYPE DRAFTS OF CORRESPONDENCE	74
E273 PREPARE MONTHLY REPORTS	74
E290 TYPE FINALS OF CORRESPONDENCE	73
S731 WRITE MEDICAL ANNEXES TO CONTINGENCY PLANS, SUCH AS FIELD TRAINING EXERCISE PLANS	71
E276 PREPARE LETTERS OF APPOINTMENT	71
B45 IMPLEMENT FACILITY DISASTER CONTROL PROGRAMS	70
E137 MAINTAIN OFFICE FILES OF RECORDS, FORMS, CORRESPONDENCE, OR REPORTS	68
S729 PLAN AND DIRECT ADMINISTRATIVE AND LOGISTIC SUPPORT MEDICAL READINESS TEAMS	68
S716 COORDINATE EXERCISES AND PLANNING WITH CIVILIAN AGENCIES	68
E277 PREPARE MINUTES OF MEETINGS	67
S718 DEPLOY MOBILITY TEAMS AND EQUIPMENT	64
D94 MAINTAIN TRAINING RECORDS, CHARTS, OR GRAPHS	61
S726 PERFORM SITE SURVEYS FOR ALTERNATE MEDICAL FACILITIES	61
S727 PLAN ACTUAL OR SIMULATED EMERGENCY EVACUATION OF PATIENTS	58
E214 MAKE ENTRIES ON AF FORMS 722 (USAF C-LEVEL DATA COLLECTION)	52
S725 MONITOR SELF-AID AND BUDDY CARE TRAINING PROGRAMS	52

TABLE VI

GROUP ID NUMBER AND TITLE: ST0117, SUPERVISORY PERSONNEL CLUSTER
GROUP SIZE: 282   PERCENT OF SAMPLE: 17%
PREDOMINANT GRADE: E-5/E-6/E-7   AVERAGE TICF: 138 MONTHS
AVERAGE TAFMS: 165 MONTHS

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
E107 ANSWER PHONES	97
B24 COUNSEL PERSONNEL ON PERSONAL OR MILITARY-RELATED PROBLEMS	93
A4 DETERMINE WORK PRIORITIES	92
C72 WRITE APR	91
A18 REVIEW REGULATIONS, MANUALS, OR OTHER UNIT PUBLICATIONS	90
B42 EDIT CORRESPONDENCE	83
E115 CONDUCT ADMINISTRATIVE SELF-INSPECTIONS	82
B50 INTERPRET POLICIES, DIRECTIVES, OR PROCEDURES FOR SUBORDINATES	82
A10 ESTABLISH PERFORMANCE STANDARDS FOR SUBORDINATES	80
A14 PLAN OR SCHEDULE WORK ASSIGNMENTS	80
B41 DIRECT SUBORDINATES IN MAINTAINING WORKLOAD OR WORK PERFORMANCE STANDARDS	79
E284 REVIEW INCOMING AND OUTGOING CORRESPONDENCE	77
B52 ORIENT INCOMING PERSONNEL	73
A3 DETERMINE REQUIREMENTS FOR SPACE, PERSONNEL, EQUIPMENT, OR SUPPLIES	73
B40 DIRECT REQUISITION OF OFFICE SUPPLIES OR EQUIPMENT	70
C73 WRITE AWARDS AND DECORATION RECOMMENDATIONS	70
B38 DIRECT PREPARATION OF REPORTS, STUDIES, OR GENERAL CORRESPONDENCE	70
E126 DISTRIBUTE CORRESPONDENCE, REPORTS, OR DIRECTIVES	70
E289 TYPE DRAFTS OF CORRESPONDENCE	69
D82 CONDUCT OJT	68
E290 TYPE FINALS OF CORRESPONDENCE	67
D100 REVIEW OJT RECORDS	66
A1 ASSIGN PERSONNEL TO DUTY POSITIONS	66
D94 MAINTAIN TRAINING RECORDS, CHARTS, OR GRAPHS	66
A20 SCHEDULE TDY, LEAVES, OR PASSES	65
E276 PREPARE LETTERS OF APPOINTMENT	65
E127 ESTABLISH AND MAINTAIN SUSPENSE SYSTEMS	63
A13 PLAN MEETINGS, SUCH AS BRIEFINGS, CONFERENCES, OR STAFF STUDIES	62
C68 INDORSE AIRMAN PERFORMANCE REPORTS (APR)	61
C61 EVALUATE INSPECTION REPORTS OR PROCEDURES FINDINGS	60
D96 PLAN OJT	50

TABLE VII

GROUP ID NUMBER AND TITLE: STO220, FACILITY MANAGEMENT PERSONNEL
GROUP SIZE: 32   PERCENT OF SAMPLE: 2%
PREDOMINANT GRADE: E-5/E-6/E-7   AVERAGE TICF: 101 MONTHS
AVERAGE TAFMS: 136 MONTHS

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
E107 ANSWER PHONES	94
E188 MAKE ENTRIES ON AF FORMS 332 (BCE WORK REQUEST)	94
R107 MAINTAIN STATUS LOGS ON APPROVED WORK REQUESTS	94
R684 CONTACT APPLICABLE AGENCIES TO CORRECT FIRE HAZARD DISCREPANCIES	94
R685 COORDINATE MAINTENANCE OF FACILITIES WITH OTHER AGENCIES	91
R700 MAINTAIN LOGS OF SERVICE OR MINOR CONSTRUCTION REQUESTS	91
R696 FOLLOW-UP SERVICE CALLS FOR COMPLETED WORK	88
R682 CONDUCT FIRE SAFETY AND SECURITY INSPECTIONS FOR MTF	88
R683 CONDUCT FOLLOW-UP INSPECTIONS OF MAINTENANCE OR REPAIR OF MEDICAL ACTIVITIES	84
R681 CONDUCT FIRE DRILLS	84
R697 INSPECT CUSTODIAL SUPPLIED SERVICES	84
R707 PREPARE TELECOMMUNICATIONS WORK ORDERS FOR NEW AND EXISTING COMMUNICATIONS EQUIPMENT	81
A22 WRITE WORK ORDERS OR REQUESTS FOR ACTION BY FACILITIES MANAGEMENT	78
E290 TYPE FINALS OF CORRESPONDENCE	78
R710 TRANSMIT SERVICE CALLS TO BCE	75
E289 TYPE DRAFTS OF CORRESPONDENCE	75
A18 REVIEW REGULATIONS, MANUALS, OR OTHER UNIT PUBLICATIONS	75
C69 INSPECT HOSPITAL OR MEDICAL TREATMENT FACILITIES	72
E119 CONDUCT SAFETY INSPECTIONS	72
E284 REVIEW INCOMING AND OUTGOING CORRESPONDENCE	72
E137 MAINTAIN OFFICE FILES OF RECORDS, FORMS, CORRESPONDENCE, OR REPORTS	72
R693 DIRECT MEDICAL ACTIVITIES GROUNDS MAINTENANCE	72
R705 PREPARE SINGLE LINE DRAWINGS TO ACCOMPANY WORK ORDER REQUESTS	72
R695 EVALUATE MAINTENANCE OR REPAIR REQUESTS RECEIVED FROM WORKCENTERS FOR FEASIBILITY	69
B46 IMPLEMENT SAFETY PROGRAMS	69
E150 MAKE ENTRIES ON AF FORMS 1135 (BCE REAL PROPERTY MAINTENANCE REQUEST)	66
R677 ADVISE COMMANDERS OR HOSPITAL ADMINISTRATORS CONCERNING NEEDED EQUIPMENT	66

TABLE VIII

GROUP ID NUMBER AND TITLE: STO190, METHODS IMPROVEMENT PROGRAM NCOs
GROUP SIZE: 11   PERCENT OF SAMPLE: .7%
PREDOMINANT GRADE: E-5/E-6/E-7   AVERAGE TICF: 135 MONTHS
AVERAGE TAFMS: 139 MONTHS

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

	REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
P620	MONITOR MTF SUGGESTION PROGRAMS	100
P618	MONITOR MEDICAL TREATMENT FACILITY (MTF) SELF-INSPECTION PROGRAMS	91
B37	DIRECT OPERATION OF RESOURCES MANAGEMENT FUNCTIONS	82
P619	MONITOR METHODS IMPROVEMENT PROGRAMS	82
E107	ANSWER PHONES	82
P603	COORDINATE METHODS IMPROVEMENT CROSSFEEDS WITH OTHER SECTIONS	82
P608	DIRECT METHODS IMPROVEMENT PROGRAMS	82
E127	ESTABLISH AND MAINTAIN SUSPENSE SYSTEMS	82
B48	IMPLEMENT SUGGESTION PROGRAMS	73
E273	PREPARE MONTHLY REPORTS	73
P602	CONSOLIDATE METHODS IMPROVEMENT PROGRAMS	73
E115	CONDUCT ADMINISTRATIVE SELF-INSPECTIONS	73
E284	REVIEW INCOMING AND OUTGOING CORRESPONDENCE	73
B38	DIRECT PREPARATION OF REPORTS, STUDIES, OR GENERAL CORRESPONDENCE	73
E275	PREPARE CHECKLISTS	64
E126	DISTRIBUTE CORRESPONDENCE, REPORTS, OR DIRECTIVES	64
C66	EVALUATE SUGGESTIONS	64
E276	PREPARE LETTERS OF APPOINTMENT	64
A13	PLAN MEETINGS, SUCH AS BRIEFINGS, CONFERENCES, OR STAFF STUDIES	64
A18	REVIEW REGULATIONS, MANUALS, OR OTHER UNIT PUBLICATIONS	64
A4	DETERMINE WORK PRIORITIES	64
E289	TYPE DRAFTS OF CORRESPONDENCE	55
E290	TYPE FINALS OF CORRESPONDENCE	55
P591	COLLECT PAYMENT FOR TREATMENT FURNISHED	55
E139	MAINTAIN SUPPLIES OF FORMS AND OFFICE MATERIALS	55
B42	EDIT CORRESPONDENCE	45
C75	WRITE RECOMMENDATIONS FOR CORRECTING INSPECTION DEFICIENCIES	45
E277	PREPARE MINUTES OF MEETINGS	45

TABLE IX

GROUP ID NUMBER AND TITLE: STO196, MEDICAL EVALUATION BOARD (MEB) PERSONNEL
GROUP SIZE: 24   PERCENT OF SAMPLE: 1%
PREDOMINANT GRADE: E-4/E-5   AVERAGE TICF: 100 MONTHS
AVERAGE TAFMS: 125 MONTHS

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
K450 COUNSEL PERSONNEL MEETING MEDICAL BOARDS ON RIGHTS OR BENEFITS	100
K447 COMPILE AND REVIEW CASE FILES OF INDIVIDUALS MEETING MEDICAL BOARDS FOR COMPLETENESS	96
K463 SCHEDULE MEDICAL BOARDS	96
K446 BRIEF HOSPITAL PERSONNEL ON MEDICAL EVALUATION BOARDS (MEB) AND PHYSICAL EVALUATION BOARDS (PEB)	96
E211 MAKE ENTRIES ON AF FORMS 618 (MEDICAL BOARD REPORT)	92
K458 PERFORM MEB RECORDER DUTIES	88
K457 OBTAIN RECORDS OF PRIOR HOSPITALIZATION ON PATIENTS MEETING MEB	83
K459 PERFORM PHYSICAL EVALUATION BOARD LIAISON OFFICER (PEBLO) DUTIES	83
K464 SCHEDULE MEMBERS FOR MEDICAL BOARDS	79
B31 DIRECT OPERATION OF MEDICAL BOARD ACTIVITIES	79
K455 NOTIFY INDIVIDUAL'S COMMANDER AND CBPO OF MEB RESULTS	79
K461 REQUEST MEDICAL HOLD ON PATIENTS FOR MEB ACTIONS	75
K465 SCHEDULE PERSONNEL TO MEET PEB	67
F310 DETERMINE ELIGIBILITY FOR TREATMENT	67
A18 REVIEW REGULATIONS, MANUALS, OR OTHER UNIT PUBLICATIONS	63
B35 DIRECT OPERATION OF PATIENT AFFAIRS FUNCTIONS	58
E205 MAKE ENTRIES ON AF FORMS 570 (NOTIFICATION OF PATIENT'S MEDICAL STATUS)	58
F335 PROCESS REQUESTS FOR RELEASE OF MEDICAL INFORMATION, SUCH AS OSI OR FREEDOM OF INFORMATION ACT (FOIA) REQUESTS	58
C72 WRITE APR	58
K456 OBTAIN PERSONNEL RECORDS OF PATIENTS MEETING MEDICAL BOARDS	54
E284 REVIEW INCOMING AND OUTGOING CORRESPONDENCE	54
F340 RESOLVE PATIENT COMPLAINTS	54

TABLE X

GROUP ID NUMBER AND TITLE: STO219, MEDICAL INFORMATION SYSTEMS PERSONNEL
GROUP SIZE: 28   PERCENT OF SAMPLE: 2%
PREDOMINANT GRADE: E-4/E-5   AVERAGE TICF: 79 MONTHS
AVERAGE TAFMS: 89 MONTHS

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
T732 ARRANGE FOR REPAIR OF COMPUTER	100
T737 INSTALL COMPUTER SYSTEMS	100
T740 MAINTAIN SOFTWARE INVENTORIES	96
T742 MONITOR UTILIZATION OF AUTOMATED DATA PROCESSING (ADP) RESOURCES	89
T741 MONITOR MEDICAL INFORMATION SYSTEMS SECURITY	89
T739 MAINTAIN HARDWARE INVENTORIES	89
E107 ANSWER PHONES	89
T735 DEVELOP MEDICAL INFORMATION SYSTEMS COMPUTER PROGRAMS	75
T734 DEVELOP BACKUP RECOVERY PROCEDURES FOR COMPUTER SYSTEMS	75
T745 PROVIDE NETWORK HARDWARE AND SOFTWARE TECHNICAL ASSISTANCE	71
T743 PERFORM ACCEPTANCE TESTING PROCEDURES ON ADP EQUIPMENT	71
T736 DUPLICATE SOFTWARE PROGRAMS	71
D81 CONDUCT AUTOMATED DATA PROCESSING (ADP) USER TRAINING	68
T733 DEVELOP AUTOMATED MEDICAL SYSTEMS IMPLEMENTATION PLANS	68
T744 PERFORM SYSTEMS ANALYSIS FUNCTIONS FOR ADP EQUIPMENT	64
E131 INVENTORY EQUIPMENT, TOOLS, OR SUPPLIES	50
E266 ORDER OFFICE SUPPLIES AND EQUIPMENT	46
E187 MAKE ENTRIES ON AF FORMS 3215 (INFORMATION SYSTEMS REQUIREMENTS DOCUMENT)	43
E281 RETRIEVE PATIENT DATA FROM COMPUTER TERMINALS	43
E289 TYPE DRAFTS OF CORRESPONDENCE	39
E290 TYPE FINALS OF CORRESPONDENCE	39
E284 REVIEW INCOMING AND OUTGOING CORRESPONDENCE	39
A4 DETERMINE WORK PRIORITIES	39
A6 DEVELOP WORK METHODS OR PROCEDURES	39
E186 MAKE ENTRIES ON AF FORMS 3078 (WEEKLY PERSONNEL TIME AND SALARY DISTRIBUTION WORKSHEET)	36
E137 MAINTAIN OFFICE FILES OF RECORDS, FORMS, CORRESPONDENCE, OR REPORTS	36
E273 PREPARE MONTHLY REPORTS	32
E139 MAINTAIN SUPPLIES OF FORMS AND OFFICE MATERIALS	32

TABLE XI

GROUP ID NUMBER AND TITLE: ST0046, RESOURCES MANAGEMENT PERSONNEL CLUSTER
GROUP SIZE: 109   PERCENT OF SAMPLE: 7%
PREDOMINANT GRADE: E-3/E-4   AVERAGE TICF: 53 MONTHS
AVERAGE TAFMS: 61 MONTHS

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
E107 ANSWER PHONES	95
P591 COLLECT PAYMENT FOR TREATMENT FURNISHED	76
E273 PREPARE MONTHLY REPORTS	75
E148 MAKE ENTRIES ON AF FORMS 1127 FORMS (HOSPITAL INVOICE/ RECEIPT/ACCOUNT RECEIVABLE RECORD)	61
P590 COLLECT PATIENT VALUABLES	59
E186 MAKE ENTRIES ON AF FORMS 3078 (WEEKLY PERSONNEL TIME AND SALARY DISTRIBUTION WORKSHEET)	56
P604 DEPOSIT MONIES COLLECTED WITH AFO	55
P614 MAINTAIN CHANGE FUNDS	50
E181 MAKE ENTRIES ON AF FORMS 235A (REPORT OF PATIENTS (SEC VIII-IX))	47
E183 MAKE ENTRIES ON AF FORMS 235E (REPORT OF PATIENTS - MANPOWER STANDARDS SUPPLEMENT)	46
E141 MAKE ENTRIES ON AF FORMS 1052 (ENVELOPE FOR STORING PATIENT'S VALUABLES)	46
E180 MAKE ENTRIES ON AF FORMS 235 (REPORT OF PATIENTS (SEC I-VII))	45
E137 MAINTAIN OFFICE FILES OF RECORDS, FORMS, CORRESPONDENCE, OR REPORTS	42
E225 MAKE ENTRIES ON DD FORMS 1131 (CASH COLLECTION VOUCHER)	42
E289 TYPE DRAFTS OF CORRESPONDENCE	42
E281 RETRIEVE PATIENT DATA FROM COMPUTER TERMINALS	41
E290 TYPE FINALS OF CORRESPONDENCE	41
P622 PERFORM AUDITS FOR REPORT OF PATIENTS	40
P638 SUSPENSE AND FOLLOW-UP UNPAID BILLS	40
E130 HAND-CARRY FORMS TO OTHER OFFICES	40
E142 MAKE ENTRIES ON AF FORMS 1053 (RECORD OF PATIENTS STORING VALUABLES)	40
E139 MAINTAIN SUPPLIES OF FORMS AND OFFICE MATERIALS	39
P605 DETERMINE CATEGORIES OF PAY PATIENTS	39
E253 MAKE ENTRIES ON SF FORMS 1034 (PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL)	39

TABLE XII.

GROUP ID NUMBER AND TITLE: STO199, HEALTH BENEFITS ADVISORS
GROUP SIZE: 12   PERCENT OF SAMPLE: .7%
PREDOMINANT GRADE: E-3/E-4   AVERAGE TICF: 52 MONTHS
AVERAGE TAFMS: 71 MONTHS

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

	REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
F291	ADVISE PERSONNEL ON CIVILIAN HEALTH AND MEDICAL PROGRAMS OF THE UNIFORMED SERVICES (CHAMPUS) ENTITLEMENTS	100
E107	ANSWER PHONES	100
F316	ISSUE NONAVAILABILITY STATEMENTS	83
E285	SCHEDULE APPOINTMENTS	83
F318	MAINTAIN NONAVAILABILITY STATEMENT LOGS	75
E227	MAKE ENTRIES ON DD FORMS 1251 (UNIFORMED SERVICES MEDICAL TREATMENT FACILITY NONAVAILABILITY STATEMENT)	75
E213	MAKE ENTRIES ON AF FORMS 676 (AUTHORIZATION FOR SUPPLEMENTAL CIVILIAN HEALTH SERVICES)	75
E130	HAND-CARRY FORMS TO OTHER OFFICES	58
E281	RETRIEVE PATIENT DATA FROM COMPUTER TERMINALS	58
E236	MAKE ENTRIES ON DD FORMS 2161 (REFERRAL FOR CIVILIAN MEDICAL CARE)	50
F312	ENTER PATIENT DATA INTO COMPUTER TERMINALS	50
F310	DETERMINE ELIGIBILITY FOR TREATMENT	50
E129	GREET INCOMING VISITORS	42
F352	VERIFY EXISTENCE OF CIVILIAN MEDICAL FACILITIES THAT PROVIDE CARE FOR MILITARY MEMBERS	42
E114	COMPLETE PATIENT IDENTIFICATION DATA ON MEDICAL FORMS	42
E139	MAINTAIN SUPPLIES OF FORMS AND OFFICE MATERIALS	42
E273	PREPARE MONTHLY REPORTS	42
E248	MAKE ENTRIES ON DD FORMS 844 (REQUISITION FOR LOCAL DUPLICATING SERVICE	33
M543	VERIFY PATIENT ELIGIBILITY USING DEERS AND MILITARY IDENTIFICATION CARDS	25
M532	REFER PATIENTS NOT ENROLLED IN DEFENSE ELIGIBILITY ENROLLMENT REPORTING SYSTEM (DEERS) TO CBPO FOR ENROLLMENT	25
E137	MAINTAIN OFFICE FILES OF RECORDS, FORMS, CORRESPONDENCE, OR REPORTS	25
A4	DETERMINE WORK PRIORITIES	25
E127	ESTABLISH AND MAINTAIN SUSPENSE SYSTEMS	25
E126	DISTRIBUTE CORRESPONDENCE, REPORTS, OR DIRECTIVES	25
F338	RESEARCH AND EXTRACT INFORMATION FROM MEDICAL RECORDS	25

TABLE XIII

GROUP ID NUMBER AND TITLE: ST0099, APPOINTMENTS PERSONNEL CLUSTER
GROUP SIZE: 40   PERCENT OF SAMPLE: 2%
PREDOMINANT GRADE: E-3/E-4   AVERAGE TICF: 51 MONTHS
AVERAGE TAFMS: 59 MONTHS

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

	REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
E107	ANSWER PHONES	95
E285	SCHEDULE APPOINTMENTS	90
E260	MAKE ENTRIES ON SF FORMS 600 (HEALTH RECORD - CHRONOLOGICAL RECORD OF MEDICAL CARE)	73
F343	SCHEDULE FOLLOW-TREATMENTS	70
E114	COMPLETE PATIENT IDENTIFICATION DATA ON MEDICAL FORMS	68
E185	MAKE ENTRIES ON AF FORMS 250 (HEALTH RECORD CHARGE OUT REQUEST)	63
E130	HAND-CARRY FORMS TO OTHER OFFICES	63
M514	GREET PATIENTS	60
E139	MAINTAIN SUPPLIES OF FORMS AND OFFICE MATERIALS	60
M510	FILE AND CHARGE OUT MEDICAL RECORDS	55
E137	MAINTAIN OFFICE FILES OF RECORDS, FORMS, CORRESPONDENCE, OR REPORTS	55
M535	SCHEDULE PATIENT APPOINTMENTS THROUGH CENTRAL APPOINTMENTS	53
E281	RETRIEVE PATIENT DATA FROM COMPUTER TERMINALS	53
E290	TYPE FINALS OF CORRESPONDENCE	53
F312	ENTER PATIENT DATA INTO COMPUTER TERMINALS	50
G369	PERFORM INFORMATION DESK AND RECEPTIONIST DUTIES	48
E194	MAKE ENTRIES ON AF FORMS 490 (MEDICAL/DENTAL APPOINTMENT)	48
M523	PREPARE APPOINTMENTS SHEETS	45
E289	TYPE DRAFTS OF CORRESPONDENCE	45
M540	SEARCH FOR MISPLACED MEDICAL RECORDS	45
E266	ORDER OFFICE SUPPLIES AND EQUIPMENT	45
M518	MAINTAIN PROVIDERS APPOINTMENT BOOKS	43
E200	MAKE ENTRIES ON AF FORMS 555 (PATIENT VISIT REGISTER)	43
M531	PROVIDE PATIENT INFORMATION, SUCH AS APPOINTMENT TIMES OR LOCATION OF PHYSICIANS	43
M536	SCREEN AND FILE FORMS IN MEDICAL RECORDS	40
E129	GREET INCOMING VISITORS	38
E186	MAKE ENTRIES ON AF FORMS 3078 (WEEKLY PERSONNEL TIME AND SALARY DISTRIBUTION WORKSHEET)	38
E128	ESTABLISH REQUIREMENTS FOR PUBLICATIONS AND FORMS	38

TABLE XIV

GROUP ID NUMBER AND TITLE: ST0064, OUTPATIENT RECORDS PERSONNEL CLUSTER
GROUP SIZE: 301   PERCENT OF SAMPLE: 18%
PREDOMINANT GRADE: E-3/E-4/E-5   AVERAGE TICF: 42 MONTHS
AVERAGE TAFMS: 52 MONTHS

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

	REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
M510	FILE AND CHARGE OUT MEDICAL RECORDS	97
M540	SEARCH FOR MISPLACED MEDICAL RECORDS	94
M511	FILE LOOSE PAPERWORK USING MEDICAL RECORD CHARGEOUT GUIDES	93
M509	CREATE MEDICAL RECORDS FOR NEW PATIENTS	93
M536	SCREEN AND FILE FORMS IN MEDICAL RECORDS	88
M514	GREET PATIENTS	88
E107	ANSWER PHONES	87
M541	SEARCH WORLDWIDE LOCATORS FOR PATIENT IDENTIFICATION AND LOCATION	84
M543	VERIFY PATIENT ELIGIBILITY USING DEERS AND MILITARY IDENTIFICATION CARDS	82
M526	PREPARE OUTPATIENT RECORDS FOR PHYSICIANS AND CLINICS	80
M527	PREPARE OUTPATIENT RECORDS FOR TRANSFER BY HANDCARRYING	78
M533	RETIRE OUTPATIENT MEDICAL RECORDS AND INDEX CARDS	78
M512	FORWARD APPOINTMENT SHEETS AND MEDICAL RECORDS TO CLINICS	77
M537	SCREEN INCOMING MEDICAL RECORDS	76
M528	PREPARE OUTPATIENT RECORDS FOR TRANSFER BY MAIL	75
E185	MAKE ENTRIES ON AF FORMS 250 (HEALTH RECORD CHARGE OUT REQUEST)	74
M508	ANNOTATE SENSITIVITY INFORMATION ON OUTPATIENT RECORD FOLDERS	73
M522	PICK UP RECORDS FROM PHYSICIANS AND CLINICS TO RETURN TO FILES	72
M516	INVENTORY MILITARY OUTPATIENT RECORDS ANNUALLY	70
M532	REFER PATIENTS NOT ENROLLED IN DEFENSE ELIGIBILITY ENROLL-MENT REPORTING SYSTEM (DEERS) TO CBPO FOR ENROLLMENT	70
E260	MAKE ENTRIES ON SF FORMS 600 (HEALTH RECORD-CHRONOLOGICAL RECORD OF MEDICAL CARE)	68
M529	PREPARE RECORDS FOR TRANSFER TO CBPO FOR ACTIVE DUTY PERSONNEL UNDERGOING A PERMANENT CHANGE OF STATION (PCS)	68
E114	COMPLETE PATIENT IDENTIFICATION DATA ON MEDICAL FORMS	67
M530	PREPARE REQUESTS FOR MEDICAL OR DENTAL RECORDS	67
M539	SCREEN OUTPATIENT RECORDS FOR RETIREMENT	66
M515	IDENTIFY RECORDS OF MILITARY INDIVIDUALS ON PERSONNEL RELIABILITY PROGRAMS (PRP)	63
M531	PROVIDE PATIENT INFORMATION, SUCH AS APPOINTMENT TIMES OR LOCATION OF PHYSICIANS	60

TABLE XV

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
E107 ANSWER PHONES	93
G353 ADMIT OR DISCHARGE PATIENTS USING AUTOMATED QUALITY OF CARE EVALUATION SUPPORT SYSTEM (AQCESS)	86
G355 CLEAR PATIENTS FROM HOSPITALS	85
G370 PREPARE ADMISSION AND DISPOSITION (A&D) LISTS	82
G371 PREPARE IDENTIFICATION BANDS FOR PATIENTS	81
F312 ENTER PATIENT DATA INTO COMPUTER TERMINALS	79
G377 VERIFY ELIGIBILITY OF PATIENTS ADMITTED TO HOSPITAL	79
E201 MAKE ENTRIES ON AF FORMS 560 (AUTHORIZATION AND TREATMENT STATEMENT)	78
G368 NOTIFY MEMBER'S UNIT UPON ADMISSION TO QUARTERS OR HOSPITAL	77
E207 MAKE ENTRIES ON AF FORMS 577 (PATIENT'S CLEARANCE RECORD)	71
G373 PREPARE PATIENT LOCATOR CARDS	69
G360 MAINTAIN QUARTERS CASE FILES	69
E114 COMPLETE PATIENT IDENTIFICATION DATA ON MEDICAL FORMS	68
F310 DETERMINE ELIGIBILITY FOR TREATMENT	66
G361 MAINTAIN ROSTERS OF PERSONS SERIOUSLY ILL, VERY SERIOUSLY ILL, AND INCAPACITATED	66
G369 PERFORM INFORMATION DESK AND RECEPTIONIST DUTIES	64
G367 NOTIFY INTERESTED AGENCIES OF SERIOUSLY ILL, VERY SERIOUSLY ILL, AND INCAPACITATED PERSONNEL	64
G363 NOTIFY ARMY OR NAVY UPON ADMISSION OF ARMY, NAVY, OR MARINE PERSONNEL	64
G362 MAINTAIN SUSPENSE FILES ON SUBSISTENCE ELSEWHERE (SEW) PATIENTS	60
G356 CONTACT OR LOCATE INDIVIDUALS ON QUARTERS	59
G358 INITIATE CLINICAL RECORDS	58
E130 HAND-CARRY FORMS TO OTHER OFFICES	56
E205 MAKE ENTRIES ON AF FORMS 570 (NOTIFICATION PATIENT'S MEDICAL STATUS)	54
E281 RETRIEVE PATIENT DATA FROM COMPUTER TERMINALS	53
G366 NOTIFY HIGHER HEADQUARTERS UPON ADMISSION OF AF MEDICAL SERVICE COLONELS OR KEY STAFF PERSONNEL	53
G375 UPDATE CURRENT BED STATUS	53
G364 NOTIFY HEADQUARTERS UNITED STATES AIR FORCE (USAF) ON ADMISSIONS OF ACTIVE DUTY OR RETIRED AIR FORCE GENERALS	52

TABLE XVI

GROUP ID NUMBER AND TITLE: ST0039, CLINICAL (INPATIENT) RECORDS PERSONNEL CLUSTER
GROUP SIZE: 75   PERCENT OF SAMPLE: 5%
PREDOMINANT GRADE: E-3/E-4   AVERAGE TICF: 43 MONTHS
AVERAGE TAFMS: 49 MONTHS

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
E107 ANSWER PHONES	93
J429 FILE MEDICAL PAPERWORK IN INDIVIDUAL CLINICAL RECORDS	85
J428 COORDINATE COMPLETION OF CLINICAL RECORDS WITH PHYSICIANS OR NURSING STAFFS	67
E114 COMPLETE PATIENT IDENTIFICATION DATA ON MEDICAL FORMS	67
J442 REVIEW CLINICAL RECORDS FOR COMPLETENESS UPON RELEASE OF PATIENTS	64
J441 RETIRE INPATIENT MEDICAL RECORDS	64
J435 PERFORM CLINICAL RECORDS FUNCTIONS USING AQCESS	61
J443 SCREEN INPATIENT CLINICAL RECORDS UPON DISCHARGE OF PATIENTS	61
E201 MAKE ENTRIES ON AF FORMS 560 (AUTHORIZATION AND TREATMENT STATEMENT)	60
E130 HAND-CARRY FORMS TO OTHER OFFICES	56
J438 PREPARE MEDICAL RECORDS FOR COMMITTEE'S OR PHYSICIAN'S REVIEW	55
E185 MAKE ENTRIES ON AF FORMS 250 (HEALTH RECORD CHARGE OUT REQUEST)	52
J437 PREPARE CLINICAL RECORDS FOR AUDITS	49
E281 RETRIEVE PATIENT DATA FROM COMPUTER TERMINALS	49
O572 ASSEMBLE INPATIENTS' CHARTS PRIOR TO DISCHARGE	49
E219 MAKE ENTRIES ON AF FORMS 788 (INPATIENT RECORD)	49
J439 RESEARCH AND TRANSCRIBE DISEASE CODING PROCEDURES FROM INTERNATIONAL CLASSIF OF DISEASES (ICD-9-CM (VOL I & II))	48
J440 RESEARCH AND TRANSCRIBE SURGICAL CODING PROCEDURES FORM (CDM-9-CM (VOL III)	47
F312 ENTER PATIENT DATA INTO COMPUTER TERMINALS	45
E210 MAKE ENTRIES ON AF FORMS 614 (CHARGE OUT RECORD)	43
E139 MAINTAIN SUPPLIES OF FORMS AND OFFICE MATERIALS	41
E137 MAINTAIN OFFICE FILES OF RECORDS, FORMS, CORRESPONDENCE, OR REPORTS	41
E266 ORDER OFFICE SUPPLIES AND EQUIPMENT	40
E203 MAKE ENTRIES ON AF FORMS 565 (RECORD OF INPATIENT TREATMENT)	39

TABLE XVII

GROUP ID NUMBER AND TITLE: ST0052, AEROMEDICAL EVACUATION PERSONNEL CLUSTER
GROUP SIZE: 64   PERCENT OF SAMPLE: 4%
PREDOMINANT GRADE: E-3/E-4   AVERAGE TICF: 58 MONTHS
AVERAGE TAFMS: 65 MONTHS

THE FOLLOWING ARE IN DESCENDING ORDER BY PERCENT MEMBERS PERFORMING:

REPRESENTATIVE TASKS	PERCENT MEMBERS PERFORMING
E107 ANSWER PHONES	95
F319 MEET INCOMING AIR EVACUATION AIRCRAFT	77
F331 PREPARE PATIENT MANIFESTS	73
E240 MAKE ENTRIES ON DD FORMS 600 (PATIENT'S BAGGAGE TAG)	70
E242 MAKE ENTRIES ON DD FORMS 602 (PATIENT EVACUATION TAG)	67
F305 CONTACT OTHER HOSPITAL SECTIONS CONCERNING PATIENT EQUIPMENT, INCOMING OR OUTGOING PATIENTS	67
F303 CONTACT APPROPRIATE AGENCIES FOR SPECIAL HANDLING OF URGENT OR PRIORITY PATIENTS	67
B29 DIRECT OPERATION OF AEROMEDICAL EVACUATION FUNCTIONS	66
F346 SEARCH PATIENTS AND BAGGAGE PRIOR TO BOARDING AIRCRAFT	66
F345 SCHEDULE TRANSPORTATION FOR AIR EVACUATION PATIENTS FROM HOSPITAL TO FLIGHTLINE	66
F339 RESEARCH AND FORWARD LOST OR UNCLAIMED BAGGAGE	66
F348 STORE BAGGAGE FOR INCOMING AIR EVACUATION PATIENTS	64
F301 CONFIRM FINAL OR INTERIM DESTINATION OF AIR EVACUATION PATIENTS	59
F306 CONTACT SCOTT COMMAND POST (SCP) TO CONFIRM AIRCRAFT ARRIVAL OR DEPARTURE TIMES	59
F304 CONTACT ARMED SERVICES MEDICAL REGULATING OFFICE (ASMRO) FOR PATIENT HOSPITAL DESIGNATION	59
F302 CONTACT AIR EVACUATION CONTROL CENTER (AECC) TO SCHEDULE PATIENT PICKUPS	58
F296 BRIEF DEPARTING PATIENTS	56
F322 OBTAIN FLIGHT SURGEON APPROVAL FOR AIR EVACUATIONS	56
F295 ASSEMBLE PATIENT RECORDS, MEDICAL SUPPLIES, AND EQUIPMENT FOR AIR EVACUATION	53
E241 MAKE ENTRIES ON DD FORMS 601 (PATIENT EVACUATION MANIFEST)	53
F347 SIGN FOR SUPPLIES, RECORDS, AND PATIENTS TRANSFERRING FROM OTHER HOSPITALS	53
H386 LOAD OR UNLOAD BAGGAGE AND EQUIPMENT	52
H384 FILE AIR EVACUATION MISSION DOCUMENTS	52
F337 REQUEST SPECIAL DIETS FOR AIR EVACUATION PATIENTS	52
F297 BRIEF MEDICAL CREW DIRECTORS OR OTHER ATTENDANTS AT ON-LOAD POINTS	50